## Solihull Local Area Special Educational Needs and Disabilities (SEND) Self Evaluation Framework 2024/25







Brightening young futures



Birmingham and Solihull Integrated Care System Caring about healthier lives





### **Our Additional Needs Strategy**

In Solihull we believe that every child and young person matters equally. We know that many children and young people with special educational needs and/or disabilities (SEND) or additional needs may need more support in their life. We have worked with them, their parent carers, and those who support them to write our Additional Needs Strategy which was launched in January 2022.

The Additional Needs Strategy underpins all our strategic work. We worked with children, young people and parent carers to write this strategy in a different, more user-friendly way. Written directly to the children and young people whose lives we are working to improve - always holding them at the heart of all we do.

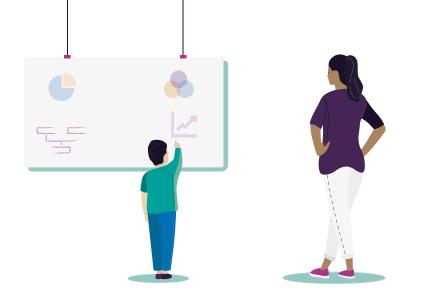
### **About This Report**

The regular and embedded practice of updating this self-evaluation document supports reflection of areas for development. Partners actively learn from other areas and there is a willingness to be challenged (particularly through feedback from Solihull Parent Carer Voice and Our Voices Heard), to listen, respond and adapt.

Our SEND Executive Leadership Board and ICB Place Committee provide senior leadership across the LA, ICB and other key partners. There is embedded practice of reviewing our activity based upon regular feedback and ensuring our plans reflect the wants and needs of our children and young people and their families. Our Joint Strategic Needs Assessment (Strategic Activity) provides data to support continuous improvement.



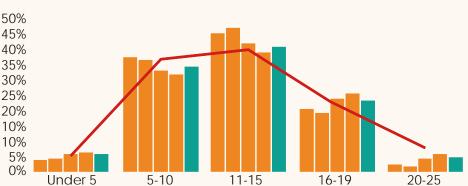
## Summary-Data Overview 🖄



### Our Data - SEN2 2023 (published June 2024)

- 3.69% children and young people (0-25) with an EHCP
- 4.1% of children with EHCPs and 14.3% SEN Support in schools
- 21.9% looked after children, and 9% of those on a child protection plan, with an EHCP
- 36% of pupils with an EHCP in special schools and 30.1% in mainstream
- 5% adults with learning disabilities in paid employment and 78% living at home or with family

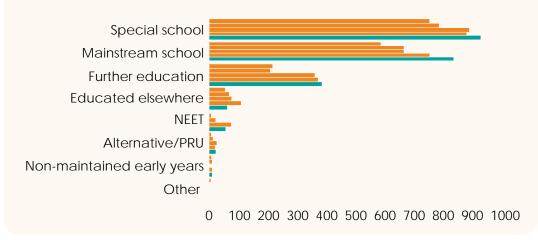
ECHP % of cohort (0-25) 4 3.5 3 2.5 2 1.5 1 0.5 0 2020 2023 2021 2022 2024 Solihull National Stat Neighbour



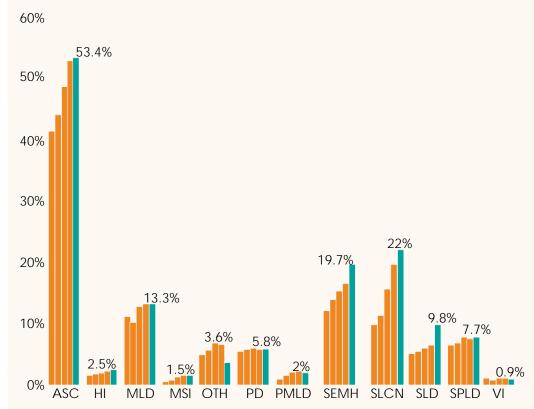
0.ii - ECHP % 2020 - 2024

## Summary- Data Overview 😕

### Where children with EHCPs are educated



### Primary needs types 2020 - 2024



## Summary

### Our Children (compared to 2023 national data sets)

#### **SEND**

More likely to achieve a good level of development in EYFS More Likely to receive SEND support More likely to reach expected standard or higher in KS1 writing More likely to achieve GCSE Grade 4 or above in English and Maths More Likely to be absent or persistently absent from school More likely to remain in education, employment, or training after KS5 More likely to achieve Level 2 or 3 qualification by 19 years old More likely to reach expected standard or higher in KS2 reading, writing and maths

### BOTH

More likely to have autism More likely to achieve a higher attainment 8 score More likely to have unauthorised absence Less likely to be suspended or excluded

### EHCP

More likely to be given an EHCP at a younger age More likely to have an EHCP, but less likely at school age More likely to have an EHCP in 20 weeks Less likely to have a new EHCP More likely for school to receive higher funding More likely to go to a tribunal Less likely to meet Year 1 phonics standard More likely to be in a special school Less likely to reach expected standard or higher in KS2 reading, writing, and maths More likely to be looked after or on a child protection plan Less likely to remain in education, employment, or training after KS4



### Young people from Our Voices Heard

One of our fabulous young people talking about what he gains from being a part of Our Voices Heard, and why he thinks more children and young people should join. (Video on the Our Voices Heard facebook page)

#### Governance

There is strong leadership across the LA, ICB, NHS Trusts and other partners supporting our children and young people with SEND and additional needs to achieve their ambitions.

There is strategic agreement of borough-based partnership priorities for children and young people's health and well-being, developing robust joint governance processes and strategic involvement including leadership from headteachers across several key priority areas.

There have been significant improvements in our SEND services over the past few years, but we acknowledge it takes longer than this for all families to experience positive change. We also recognise that we are on an improvement journey in relation to key children's services but we are working closely with Ofsted and the commissioner and our steps towards improvement are being noted. Our Additional Needs Strategy 2022-2025 centres on the voice of the child







## Recent Achievements

## Some of our recent achievements towards our Additional Needs Strategic priorities:

- Giving children, young people and parent carers a voice through co-producing the Additional Needs Strategy and action plans using the You said, we did approach
- Strong partnership working with strategic plans in place, some being led by headteachers, and close monitoring of progress and outcomes
- Active engagement with children, young people and parent carers with visible and effective co-production at all levels
- Accurate identification and timely assessment of needs through significant improvement in the timeliness and quality of EHCPs
- Commissioning the provision children need with a 30% increase in special school places (2019-23) and a new DfE free special school approved
- Children being prepared for their next steps with strong joined up practice in the Early Years
- Young people successfully moving into adulthood with supported internships now at 17 placements and a new provider involved for September 2024

- From May 2024, EHCP service prioritising Annual Reviews within 4 weeks of the meeting (Devon Ruling) and monitoring returns from schools
- Children and young people receiving help at the right time with all four Family Hubs now open (one-stop-shop for families)
- Enabling better multi-agency working with a new Early Help Strategy in place and key posts filled to support this way of working
- Children with SEND achieving strong academic outcomes to support their next steps
- Strengthening place-based joint commissioning with Sec75 agreement and high-level year 1 plan in place
- Support Whilst Waiting Webpage available; including therapies and neurodevelopment wait times published (updated quarterly)



## **Co-Production**

Co-Production is at the heart of our practice so that children, young people and their families participate in decision-making about their collective and individual plans and support. Co-creating our ambition for their lives.

Our Let's Talk SEND, SEND Celebration and Our Voices Heard events provide a range of opportunities meet with children and young people to understand what their lives are like and what changes they want to see.

#### **Children and Young People**

Through Solihull Parent Carer Voice, Our Voices Heard (OVH) is a youth participation programme where children and youngpeople are supported to use their voice and experience to change and design services whilst making friends and having fun. They also work with schools to gain a broader range of views.

#### Parent Carers

Solihull Parent Carer Voice (SPCV) are a key partner in the Local Area Partnership and their network has been growing at pace. They also run a key project, funded through the Delivering Better Value grant, to facilitate support groups in local schools across Solihull – building relationships and facilitating discussions between school staff and parent carers.



Our annual SEND Community Event is an opportunity to talk together about what has changed for children and young people with SEND in Solihull and their families. Looking at what is going well, what isn't working and what are the priorities for change and improvement moving forward.



## **Co-Production Examples**

Co-Production and engagement are increasingly 'business as usual'

Let's Talk SEND events for services to hear directly from children and young people on the things that matter to them. In January 2024 they asked for "bigger swings". In June there was a competition to create an inclusive playground and children met with officers from Public Realm to share their ideas and choose their favourite playground items.

Engaging with JAND Board, SENCO operational leads, Let's Talk SEND (primary and secondary) events and Solihull Parent Carer Voice to involve them in developing a new model of care for children and young people's mental health. Key focus is on integrated and graduated approach in line with Solihull's overarching graduated approach strategy.

Adult Social Care Directorate - A number of documents have been co-produced using feedback from focus groups including a Preparing for Adulthood referral letter, refreshed vision statement and leaflet. In addition, using feedback from SPCV and OVH, we refreshed and updated the **Preparing for Adulthood web pages** that sit on the Council website. As part of this, a 'bitesize' video animation was also produced. An independent review of Birmingham Heartlands Hospital children's Outpatient Department was carried out by Solihull 'Our Voices Heard' – a young person's forum for those with special educational needs and disabilities. There was some immediate verbal feedback to the area and a formal report has now been received which is being reviewed and an action plan created which will be monitored with updates into system meetings.

Children's Social Care Commissioning work in conjunction with SPCV; from engagement, reviewing and updating service specifications, to evaluation of tenders. Coproducing services with SPCV ensures services are designed in a way that meets the needs of families. Through the targeted short breaks review, SPCV were an essential partner in introducing the new grants programme and the awarding of these grants.

The Employment and Skills Team have strengthened links and process across Adults Services and Children's services, to achieve better outcomes for young people. An example is jointly funded posts, working across directorates where there are shared responsibilities for young people. Young people directly benefit by receiving faster access to appropriate support.

## Our Evaluation Framework

Our evaluation highlights areas that are working well and key areas of development. We also use case studies to highlight impact from across our community. The content of this SEF evaluates our progress against the following descriptors.....

- 1. Leaders create an environment in which effective practice and multi-agency working can flourish
- 2. Children and young people's needs are identified accurately and assessed in a timely and effective way
- 3. Children and young people receive the right help at the right time
- 4. Children and young people are well prepared for their next steps, and achieve strong outcomes
- 5. Children and young people are valued, visible and included in their communities
- 6. Alternative Provision



### Leaders create an environment in which effective practice and multiagency working can flourish

### Key areas that are working well

We have an established local partnership that develops and delivers services for children and young people with SEND to support them through their childhood and prepare them for their adult lives. Our SEND Executive Leadership Board includes representatives from Solihull Parent Carer Voice, headteachers, and partners. It is chaired by the CEO of Solihull Council alongside the Leader of the Council and Cabinet Portfolio holder. There are strong strategic and delivery boards within this governance chain to ensure multiagency work can flourish and deliver service improvements. The sustainability of outcomes and improvements includes financial and service planning and modelling which is monitored by the Council's DSG oversight group.

We have recently changed the way that we work together to make sure Solihull has the right services. From the 1st April 2024 we agreed to jointly commission a number of services including Speech and Language Therapy, Occupational Therapy, Physiotherapy, overnight short breaks and SENDIASS across the partnership. Over time, the commissioning scope will be expanded in order to better integrate and improve provision.

An All-Age Autism Service has been launched which aims to provide a reliable and easy point of children with autism and their families given the prevalence of autism in our community. Our Family hubs (Kingshurst, Elmwood, Hatchford Brook, and Riverside) enable effective multi-agency practice. They promote partnerships with schools, SENCOs and SEND services across the 0-25 age range and offer multiple opportunities to identify need and provide an integrated response across that age span. This is also alongside health and community integrated models of care (Connected Care Network) which means that services are joined up so that children and families only need to tell their story once to professionals.

We have placed significant focus on developing our offer for children and young people with SEND needs below the threshold for an Education, Health and Care Plan. Utilising the Delivering Better Value Programme, we are delivering whole system approaches for Speech Language Communication Needs (SLCN), attachment and trauma and the Whole School Nurture Approach. Some school communities of SEND Practice have been established and this approach is in further development. System-wide partnership work and co production has been key in developing the **Support Whilst Waiting** website for children and their families on health waiting lists. SEN reviews have been rolled out leading to showcase events for SENCos to start sharing Good Practice. The Local Offer has been prioritised by the partnership this year and includes the launch of the refreshed Graduated Approach for Solihull. Data shows us that visits to the Local Offer pages are increasing over time, and we continue to collect feedback. Everyone having the same understanding of SEND and a consistent approach across Education, Health and Social Care is key. Whilst developments are happening, this does remain a focus and regular discussions are held with Solihull Parent Carer Voice and Our Voices Heard to ensure content is being developed to meet their needs.

Leaders from the Council, Health, and schools come together to make sure Equity, Diversity, and Inclusion (EDI) is a focus across the local area, with all parties contributing to our **Inclusive Education Strategy** and EDI audits being carried out in our schools. This enables us to share good practice to make sure that every child and young person continues to feel welcomed, accepted and valued. We are training 26 EDI Champions from 16 schools, and they are leading EDI projects within their schools and sharing work through their Communities of Practice.





Governance Boards are being used to ensure that information is shared across the partnership. As an example, at a recent Joint Additional Needs Delivery Group meeting a member raised an emerging issue with all partners not fully understanding the link between neurodiversity in children and young people and exploitation. A group has now been established with representatives from the delivery group, exploitation board, safeguarding partnership, police and youth justice board to ensure the needs and presentation of neurodiversity is fully understood across the wider children's partnership. A SEND Key Improvement Measures dashboard is produced on a bi-monthly basis so strategic leaders can analyse key areas of interest to measure impact and monitor performance across the SEND system.

The Mental Health in Schools Team (MHST) rollout has 4 waves in Solihull with a 5th wave planned for January 2025. Waves 2, 6, 8 and 10 see the MHST cover 61/84 education establishments across the Solihull area which is approx. 73%. This is inclusive of the Electively Home Educated network and all special schools in Solihull. Wave 12 should see coverage increase to approx. 87%.

The MHST has been working with each school individually to provide clinical intervention and to look at the Whole School Approach towards Mental Health and Wellbeing. A recent piece of work in Forest Oak school was an adaptation of the Peer Listener and Mental Health Ambassador Training.



Through Year 3 of the **Autism in Schools Project**, Solihull Parent Carer Voice and specialist teachers have worked with the pupils of two secondary schools and one secondary alternative provision on "understanding my autism profile and sharing information with staff to support me better". Year 4 will roll this new resource out to Autism Champions in schools co-producing across SPCV and Birmingham teams. SPCV have also set up Parent Engagement Groups within these schools, so the work reflects the views of the whole school community.

Solihull Parent Carer Voice have established **Parent Carer Engagement Groups** in 30 schools as part of the Delivering Better Value Programme. This has been successful and is facilitating parent voice and co- production in those schools. Positive feedback has been received by schools and parent carers and workstreams in terms of inductions, anxiety and SEMH have already taken place – and supported the school in making contact with Our Voices Heard to help facilitate pupil group.





Our Children's Social Care services are on an improvement journey, with an ambitious improvement plan to strengthen the quality of our services and new initiatives introduced to shift the focus to prevention. For example, our new edge of care team, our expanded Family Group Conference service and work to develop our early help system.

This includes our children with disabilities team, who have a bespoke improvement plan and have received positive feedback in recent monitoring visits. Social workers know their children well and we have various tools to capture their wishes and feelings; including using Mind of My Own.

SEND Champions meetings are held regularly to share learning and feedback from OVH and SPCV across services. Work is also taking place to ensure our Local offer is up to date and has useful information for families.

Leaders create an environment in which effective practice and multi-agency working can flourish



Key areas that are working well



A cycle of multi-agency SEND audits brings together all professionals working with an individual child or young person to understand their (and their families) experience and reflect on areas of good practice and opportunities for improvement. Immediate actions for the child or young person are agreed if required and thematic learning is shared with the wider partnership for discussion and action; with closing the loop activity in place and general outcomes shared with SPCV as part of our 'You Said, We Did' approach.

There has been a huge response from primary schools in the summer term wanting to participate in **the Promoting Inclusion of Neurodiversity** in Schools project (PINS) – despite the challenging timescales and resource commitment. The ICB and Council alongside SPCV and 15 schools in Solihull (with a further 30 schools in Birmingham) have created a plan to deliver 37.5 hours of bespoke training and consultancy support between September 2024 – February 2025. This will be linked to each schools' self-assessment and establishing parent participation or engagement groups to enable greater understanding of how to better meet the needs and celebrate the strengths of neurodiverse pupils. We have also commissioned a developmental psychologist to work with schools on a Universal Design for Learning approach to support all pupils. As part of the **Children's Social Care improvement plan**, Case File audit actions are tracked and closing the loop activity takes place. Managers are using the learning from audits and have engaged with the Quality Assurance training sessions.

- Management oversight as part of the closure summary on the record, including writing management decisions to children where appropriate.
- Training has taken place with Children with Disabilities Team workers at team meetings. There has been a focus on the use of language and to write to the child in plans to ensure focus on impact.
- Performance meetings have been held with all workers to focus on compliance and quality and to develop a culture of high support, high challenge.
- Management oversight is improving but needs to be more purposeful to progress improved outcomes for children. A new supervision form has been rolled out, with a focus on outcomes for children.
- Improvement in relationships with health partners to support good multi- agency working with health for children who are looked after (CLA) and children with SEND. This has made a significant difference for CLA with additional needs in accessing Continuing Care funding support.
- Creating a permanent workforce is still a work in progress as we continue recruitment drives to try and attract experienced managers and workers into the team. A management of change process is taking place to strengthen operational management capacity and oversight.



## Case Study: Refresh Early Intervention 🚬

- Archie\* was struggling to access mainstream education.
- Despite a high level of consistent support over time, Archie continued to display unsafe and challenging behaviours indicating unmet SEMH needs.
- Support measures had included: 1:1 key workers, PACE approach, nurturing environment, SOLAR referral, and early intervention from the SISS SEMH team – with three cycles of reporting and strategies implemented.
- Archie has a diagnosis of ADHD (contributing to non-compliance), challenging behaviour, self-harm tendencies, and feelings of shame.
- Since joining the Infant School in March 2021, parents and school have actively sought professional advice and support from: Paediatric's, SEMH Team and SOLAR; and funded a 1:1 key worker support.
- Despite these efforts, Archie's needs were not been adequately met. He required intensive and early intervention to develop the strategies needed to access mainstream education long-term.
- During the second half of the Summer Term 2022, the school worked with parents to plan a robust, bespoke transition, which included: A TAC meeting with both SENCos and parent, transition visits, buddy afternoon, visuals (timetable – now and next), multiple meetings between key staff and Archie's new class teacher.
- Despite the carefully planned transition, Archie has found the move incredibly difficult and unsafe and challenging behaviours have continued or escalated, even with individualised provision in place.
- Referral to Refresh was agreed with following priorities to form trusting relationships and to improve his self-esteem.
- This provided a 31-week intervention placement with weekly 1-1 ELSA sessions, play therapy, links with home school, outreach work and filling gaps in academic progress.

\*name changed for confidentiality



Boxall on entry		End of placement		6 months after placement	
Developmental	Diagnostic	Developmental	Diagnostic	Developmental	Diagnostic
67	80	91	67	102	56

Note: Boxall profile Scores - After a period of nurture intervention progress is shown through an increase in Developmental scores and a decrease in Diagnostic scores.

Archie showed improvements across both developmental and diagnostic strands and continued to make progress on his return to school.

He has caught up massively with his school work, lots of help and support with his emotional well being and coping with all his emotions. At home he seems to take more pride in his achievements (parent)

He has caught up massively with his school work, lots of help and support with his emotional well being and coping with all his emotions. At home he seems to take more pride in his achievements 'parent) The adults at Refresh understand me and know how to help me. Nothing needs to be improved. I have enjoyed playing football. (Archie)

## Right support, right place, right time

### Feedback on projects funded by the Delivering Better Value grant funding.

### Nurture UK training (feedback from NurtureUK):

We are impressed with the level of engagement and participation from schools enrolled on the Solihull Nurturing Schools Programme.

Schools are in a strong position to progress on their journey on the programme and towards applying for the National Nurturing Schools Award.

Delegates are highly engaged in sessions, many of whom have made connections with each other across the programme to help embed nurturing interventions and support best practice. Delegates have reflected well on the strengths of their existing nurture provision, while also identifying a range of areas they would like to enhance as they move into the new academic year.

Enrolled Solihull schools have made effective use of the two-year Boxall Profile® Online subscription and school leaders plan to use the tool to inform interventions from September.

### Outreach support - practice partnerships:

"There has been a wealth of experience and expertise available over TEAMS with ongoing support and advice to resolve any issues or suggest adaptations to our approach. There has been such a positive climate for taking action, having a go and sharing outcomes to improve current SEND practice." (School)

"Working with specialist and current practitioners who are working day to day in a similar environment with high needs pupils was valuable." (School)

"It has given the schools great opportunities to collaborate and discuss the main challenges for SEND that mainstream education is facing. Developing professional relationships and not feeling isolated has been such a benefit". (School)

"Developing a total communication approach has empowered other pupils, both SEND and non-SEND, to engage more with the resources and strategies especially for their emotional regulation." (School)

### Trauma informed training:

"Very informative and practical to transfer to school to support children." (School)

"Excellent content, supported by useful video links and references to relevant reading material for us to access in our own time." (School)

"It was very informative. It was good to have the opportunity to refresh my knowledge and also listen to other ideas." (School)

### SPCV School Engagement:

"The session was so supportive and informative. I am really grateful for you hosting and hopeful that we can make a real difference for the parents that attended." (School)

"It has created a safe space for parents on what can be a lonely and frustrating journey." (Parent)

"It was a real success, with parents engaging very well, demonstrating that they felt that they were in a safe space. Parents spoke very positively about having such an opportunity and they have provided some suggestions for areas of focus for future sessions." (School)

"It made me feel a part of something and that I'm not alone." (Parent)

"It also gave me the opportunity to listen to other parents and also the opportunity to learn something new from other parents and their personal experience." (Parent)



## Excerpt from Mental Health in Schools Team (MHST) Case study written by staff member

During further consultations, student engagement with mental health teachings was reportedly low (later supported by the completion of the MHST audit) as they used to have a playground buddy support system that was no longer in place due to lack of staff who could support with this. I discussed our peer listener and Mental Health ambassador training with them and shared the present resources that the MHST uses. Staff shared they felt this would be beneficial for students but the resources needed to be adapted to meet the student's learning needs. The presentations were edited to have less text on each slide, some of the language was altered as staff highlighted some of the words used may not be understood, and the training was delivered over an 8-hour period rather than a 6-hour period to ensure students had time to ask questions and consolidate their learning.

The students in both training sessions were very engaged throughout and were eager to begin their roles. Later staff fed back that one particular student who was selected had been struggling to get into school due to his mental health and that him completing the Peer Listener training gave him a responsibility that had motivated him to come to school more often than before; it had encouraged more conversations around mental wellbeing at home as he was checking in with his parents and they, in turn, would check in with his wellbeing.

This training has not only benefitted the students that are supported by their trained peers, but also the students who received the training have been more engaged in school and have been noted as being more confident.



## Testimony: EHCP Team Complex Care Officer

Attendance to the DSR has enabled us to have a good understanding and working relationship with all professionals working with Younis, but most importantly with Younis themself, parents and the community teams.

We have effectively updated their EHCP from all recent professional reports and consulted with appropriate college placements. Interim tuition was also available for Younis on discharge from hospital to continue their functional skill L2 qualifications in Maths and English. This was very important to Younis and has worked well alongside other lessons funded by social care 117 funding, providing a timetable of meaningful activities each day.

A good understanding of their needs and asking about the people they work with best with has ensured that the tutors have been well matched to Younis and provides a positive experience. Younis has recently been for a college interview and received a conditional offer. This has been supported by contact with college SENCo with a positive consultation response to support their needs. Younis remains on the DSR register but updates in these meetings ensure that all service partners are well informed and able to react quickly to prevent any risk of re-admittance.

\*Names and courses changed to provide anonymity



### Children and young people's needs are identified accurately and assessed in a timely and effective way

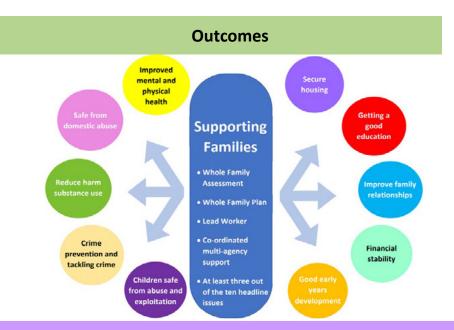
### Key areas that are working well

**Training is a key feature of our workforce development.** Health and Early Years professionals have been involved in large scale training programmes this year (Oliver McGowan training and **Dingley's Promise**). The most common theme from the Oliver McGowan training is 'that the training is delivered as part of a trio including a person who has a learning disability and an autistic person'. Ensuring that professionals are embedding the training is a focus for 2024/25. We have also begun a programme of SEND visits to all schools this year to identify good practice to share and ensure that all schools are welcoming to all children and young people through their approaches and their teaching.

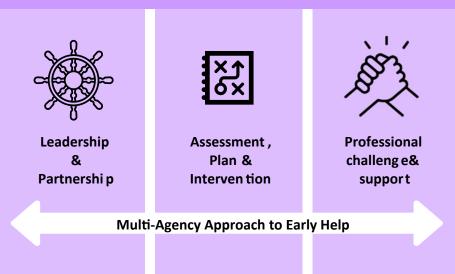
An early year's pathway for an Autism Spectrum Disorder assessment identifies pre-school children who are experiencing a significant level of need and support. This offers a consultative approach to assessment and diagnosis at an earlier opportunity which in turn allows enables the child to access appropriate support and educational placement. This pathway was produced with close liaison with the early year's teams in SISS. Further development work is underway due to capacity and demand challenges. Teams from across education, health and social care have been working together to make sure that the initial Education, Health Care Needs assessment is carried out as close to 20 weeks as possible, that they are well written and that when the review takes place, the updates are recorded. The teams continue to work with schools and families to make sure children and young people are involved and included in all of the processes. The national SEND data set published in June 2024 saw a slight increase nationally in the proportion of assessments carried out on time to 50.3% but for the same period **Solihull's performance** was at 99.4%. During 2024 performance has dipped due to the availability of Educational Psychologists but the year to date cumulative proportion of 73% is still above national figures.

We heavily invest in education support services so schools can access SEND specialists for help with earlier identification of, and provision for, children and young people - without unnecessary escalation to EHCPs. At £94 per capita for SEN support and support for inclusion, we are much higher than the national average of £62 - enabling more children and young people in Solihull to have their needs identified, assessed and supported at SEND support level in school (13.7%) than statistical neighbours (11.8%) and national average (13%). Our Early Help service is designed to meet children's needs in the right place at the right time, with a focus on prevention and supporting families. We continue to develop our early help system, including our offer for families where a child has SEND.

- We have established a new Early Help Partnership Board, chaired by the DCS, to develop our local early help system
- Early help strategy and operational delivery plan implemented with partners to ensure a more coherent, coordinated approach to support children and families as their needs first emerge
- We have introduced a Team Around the School approach. A pilot has begun in two schools in areas with the highest levels of referrals
- Headteacher coaches appointed, supporting schools to identify children's needs early and ensuring that the right lead professional and support is available
- 3 out of 4 Family Hubs are operational
- We have implemented new data capture and assessment forms to support improved oversight of early help performance and quality
- Begun engagement across the partnership with early help roadshows to drive the culture of early help as everyone's responsibility and to build a joint understanding of the impact of early help system
- Feedback from children, families and schools is showing the impact of changes we have made so far. There are now no families awaiting intervention
- We have secured sector-led improvement partner (SLIP) support from Warwickshire to further develop our early help vision and pathways. Dedicate support from Warwickshire will also mentor and coach key Solihull staff and work with the voluntary, community and faith sector



### **Strategic Priorities**



'We work together so that children and young people in Solihull are heard and receive help at the earliest opportunity to keep them safe from harm and neglect and have the opportunity to thrive.'



Key areas that are working well

The Preparing for Adulthood (PfA) project led by the Adult Social Care directorate (ASC) underpins and drives developments in this area. Improvements to internal social care processes and pathway have been made resulting in information being discussed with children and young people regarding preparing for adulthood at an earlier stage and referrals being sent and received by ASC in a timely manner. As an output of the project group, and to support with earlier discussions, a suite of co-produced accessible public facing PfA information has been developed; and well received by parent carers and young people.

Variation in the timeliness of referrals made to ASC has however been noted. Further work to replicate the success and impact noted between the Children's Disability Team and the Adult Disability PfA Team is being progressed, including development of a cross directorate PfA Training event. Within ASC, recruitment of a new PfA Support Worker role will strengthen existing processes and support earlier ASC engagement. The post will provide greater opportunity for earlier and collaborative involvement with a young person. The National Healthy Child Programme is a universal evidence-based programme delivered by the Health Visiting Service aimed at supporting parents, listening to and acting on concerns through a series of mandated checks in a child's early life and at any time in between. These take place at.

10-14 days (new birth visit)6-8 weeks9-12 months2-2.5 years old

Each of these developmental checks using the validated Ages and Stages tool provides an opportunity for a child's physical and emotional development to be assessed and for issues to be identified early. It is also an opportunity for parents to raise concerns about their child and for the Health Visitor to work with them to address them.

This leads to more timely interventions, referrals and earlier additional support and is a key plank of our overall partnership Early Help approach, that includes integrated working via Family Hubs, the first 1001 Days and the Start for Life initiatives.

Children and young people's needs are identified accurately and assessed in a timely and effective way





## Early Identification and Intervention: Case Study and impact

AA's needs, were identified through the ASQ assessment tool. These included; communication, limited engagement, and delayed gross motor development.

A referral was made by AA's Health Visitor (HV) in March 2023 to the Early Years Team Around the Child. He was accepted on to the early years caseload and the referral was shared with Solihull Speech and Language Therapy Team (SALT). The letter accepting children for support signposts parents to a support website to give parents ideas for shared experiences whilst waiting for support.

#### Support

Multiple visits to the home built trust between the early years Inclusion Support Practitioner (ISP) and the family. Strategies were developed to support the family and AA at home. The ISP was able to liaise between the health visiting team to ensure a consistency of approach and messaging.

Once AA was transitioning into an early years setting, the ISP helped ensured AA 's needs were known and the strategies were continuing into the new setting. The Area SENCo is now also supporting the setting.

#### Impact

As a result of this early identification and intervention, AA has demonstrated increased independence and engagement in activities. All those involved with AA and his parents have worked hard to ensure continuity of approach. The impact being that AA has the appropriate support he needs and the transition to the EY setting has been successful.. Solihull children in early years are identified early so their needs can be met at the earliest stage in their education [see EHCP data and LGA review]. Of all children with EHCPs in Reception, Y1, Y2 - all but 1 child was accessing EEF or working with the SEND early years teams This shows 99.6% involvement in early years.

There have been 2678 individual Dingley's Promise training courses accessed. This is 534 individuals accessing the 5 courses currently available.

6 settings have been awarded a Mark of Achievement.

92% of children on the Area SENCo caseload, who were entitled to Early Education Funding, were accessing their full early education entitlement. Solihull settings are inclusive.

There were 161 applications for SEN early years inclusion fund (levels 1 and 2 2023/24). 14 settings had funding to support transitions from home to setting.

In 2022/23, 87 setting benefitted from additional early years SEN funding. [52%].

## Case Study: Early Help Support 🔊

C has a diagnosis of ASD and was referred to FSS for the following:

Direct work sessions to be completed by a Family Support Worker (FSW) who may have lived experience / knowledge of supporting children with Complex ASD . This is so C. feels listened to and that these are shared with professionals to influence support plans within school. To re refer to SOLAR if evidence supports this.

To ensure FSW attends meetings and that review meetings are also taking place.

To encourage C to attend these meetings along with parents.

I supported C and the family from the 24th August 2023 to the 25th April 2024. I feel that there were a lot of positive changes for C and the family. C reports that her voice is now being listened to more. She was struggling to get teachers to understand her and due to this, she would either not go into school or would have meltdowns within school. During my involvement, C and I agreed that she use colour cards to show teachers how she was feeling. The aim of this was to make teachers aware of C's emotional state on the day. C chose red, blue & green and as a result, she felt better being in class.

C was able to see a change in how teachers responded to her, and how they helped her to respond to things appropriately. C also started using the quiet and sensory rooms more and was also approaching teachers more often.

However, there were some teachers who didn't fully understand C's needs and she would react in a negative way and C would later reflect on how she could have reacted differently. C's parents have put in place positive strategies for helping C to better regulate her emotions and they report that they now understand her needs better.

C and I had a positive relationship and she felt she could talk to me as I would always include her voice at meetings.

C struggles with regulating her emotions and I have supported her by showing her useful coping strategies, like breathing exercises and distraction techniques which she has implemented. I also made a referral to Urban Heard (Youth Engagement Specialists) and C joined their youth group and started to engage with young people with similar young people.

I was overjoyed to hear that C had put herself forward to be on the Youth Club committee and she is taking an active part in supporting other young people at the club. This is a massive step for C and one I know she will thrive in.



## Children and young people receive the right help at the right time

### Key areas that are working well

Health colleagues are undertaking work to improve the way Dynamic Support Register (DSR) information is shared and updated through procurement of an online portal so that key named professionals understand the needs of children and young people they are supporting when they are on the register. All relevant leads currently have access to this information via secure SharePoint. Professionals have worked together to create a new Dynamic Support Register for autistic adults who do not have learning disabilities. This is in early stages and fortnightly meetings have been established. For the 2023/24 academic year an additional 75 special school places were introduced to the offer in Solihull. 40 of these places were in our newest school, The Heights, which welcomed their first cohort of children with autism in September 2023 and when full will be able to offer 116 places. In May 2024, the Department for Education awarded funding for an additional new special school with an anticipated 2027 opening date for 150 SLD students to enable more access to specialist provision within the borough.

The Connected Care Network is a Solihull consortium of organisations, which began in North Solihull that have piloted working together to ensure that children tell their story once and can access the appropriate advice and support through a range of statutory and voluntary organisations within their community. They accept referrals for children and young people for whom there is no current identified pathway or may be waiting for support from other services to support them in "waiting well". 427 children were referred in the first 6 months, with over 40% of the referrals for mental health needs. Those families have reported a 55.6% decrease in issues and 50% of children are happier now than when they were referred for support. This work will be used to influence and inform wider system improvements.

The Employment and Skills Team deliver a preventative programme of support to young people in years 11, 12 and 13 at risk of becoming NEET. Support includes one to one needs assessment and small group workshops.

Year 10's at risk of becoming NEET were registered by schools by the end of July 2024 so that a programme of timely support can be delivered throughout their Year 11. The Employment and Skills team support around 150 people each year. Patients on all University Hospitals Birmingham Children's Community Therapy waiting lists are **sent support** whilst waiting information at the point of acceptance. Pathways have clinical prioritisation processes in place such as:

RAG rating – i.e., identifying urgent referrals and minimising risks while waiting, reviewing referrals at 6-month intervals to ensure their prioritisation status has not changed or to address emerging risks. - **Physio** 

Prioritisation and clinical allocation takes place to ensure higher risk patients, such as those with Dysphagia are seen quickly. - **SALT** 

Patients waiting for neurodevelopmental assessments, ASD and ADHD, are similarly sent support whilst waiting information at the point of acceptance onto the waiting list. Additionally, those on the ASD waiting are sent 6 monthly update letters with reminders to access to the signposted support. In schools, allocated hours from the SISS Autism Team can be used for advice on support for pupils who are on the waiting list, in addition to the advice available from schools' trained AET autism lead and traded services. Early Years children are supported by the Early Years team pre-diagnosis if referred to an Area SENCO.

For those on the ADHD **waiting list** a review will take place if the service is contacted by a school or GP to do so when a telephone review may take place if required or re-sending of signposting and support information.

A monthly report is shared with the Connected Care Network so children who are waiting for ADHD assessment and their families can receive additional support if required. Clinical prioritisation with the Solar service takes place on referral. Check in calls are provided to everyone who is on the intervention waiting list for their children's and adolescents' mental health services. Priority is given to those who have been waiting the longest. Alongside these check in calls, all young people and their families have access to a Duty Worker as well as the Solar Crisis Team. Crisis team availability has been extended from 8am-8pm to 24 hours.

Early years children are supported through targeted support to settings where children have 2 year old disadvantage funding and the likelihood of need is highest. Speech and Language Therapists coach local communication champions.

A Local Government Agency focused peer review in early years recently concluded the continuously improving identification and support in place for children is having a positive effect.





## Case study: Solihull Careers Hub -Castlewood & BBV Partnership

- Solihull Careers Hub supports schools and colleges to deliver a good careers programme, progress against the Gatsby Benchmarks, and ensure that all young people are aware of careers and learning pathways and can access the support they need.
- As part of this, they have been working on developing school / employer partnerships. Andrea Riley – Assistant Headteacher Careers – Castlewood School, shares her experience with BBV.

"We are delighted to share our exciting news about our recent partnership with Balfour Beatty Vinci (BBV). This will have a positive impact on our pupils within the curriculum and beyond. The partnership began in April with Naomi from BBV delivering a STEM activity where pupils worked to a brief to produce a Tower using giant Meccano.



Naomi returned with five volunteers in May. Pupils took part in a 'Guess My Job' activity, where they interacted with the props bought in by the volunteers to work out their job roles.

Pupils enjoyed this activity and learned about the variety of careers available to them within BBV.

They hope to see some of these jobs in action during the site visit that will take place in June. Special thanks to the BBV volunteers''



## Case study: Successful transition from Children's to Adult Social Care Directorate

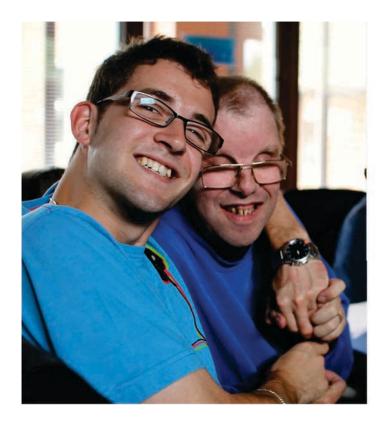
Ben is a young man with a learning disability who was living outside of Solihull in a residential care home for children. Following changes in Ben's behaviour, he had to move from this placement and was briefly admitted to hospital.

A planning meeting was convened with representatives from Children's Serviced and the Adult Social Care Directorate, including commissioners, to explore prevalent risks and service options collectively. Alternative support to meet Ben's needs were sourced that could meet his needs whilst he was under 18 years old and preparing for adulthood.

Following Ben's move to his new placement, the Children's Services Social Worker and the Adult Social Care Directorate Social Worker worked together to assess his needs whilst also attending monthly meetings to track progress.

Ben was awarded full Continuing Health Care funding and a representative from the ICB started joint working the case with the view to eventually taking over care coordination. Despite the high-risk situation requiring close collaboration, the experience for the young person was positive.

\*Name changed to provide anonymity



### Children and young people are well prepared for their next steps, and achieve strong outcomes

### Key areas that are working well

A SEND Peer Review last year highlighted strengths in our Preparation for Adulthood work including; a refreshed template, a renewed 5 day offer to reduce out of borough placements and a stable number of children entering employment where the EHC Plan is then ceased. This remains an area of focus for the partnership, as like many areas, we are seeing an increase in post 16 learners as they work through the education system following the 2014 reforms.

Nearly 90% of our mainstream schools in Solihull are graded good or better according to Ofsted Outcomes. The transition guidance for moving between primary and secondary schools has been updated by schools and SPCV. In 2024 we saw the following percentage of transitions cases receiving a finalised EHCP with a named setting by the statutory deadline: 100% of primary-secondary transition; 96% of year 11 cases; 90% yr12-14 in Solihull special schools; 96% of year 13 and post 18 cases. We have invited Solihull Parent Carer Voice to observe our decision-making panels about Education Health and Care Plans and they have reported seeing robust processes in place. There is a dedicated Specialist and Targeted team within Employment and Skills and the **Supported Internship Programme** is well established. 6 young people participated in SMBC Supported internship placements during the 2023/24 cohort year. Work experience areas included admin, stores, reception, customer service and libraries.

17 opportunities have been identified for September 2024, within the Council and externally with Solihull employers. We continue to work with employers to promote inclusive employment and create both paid and unpaid employment opportunities. The focus is on securing meaningful and sustainable work. Alongside this we are working with schools and parents to promote supported employment as a viable pathway and challenge misconceptions.

All health providers have a named transitions lead. Two CYP Continuing Care (CC) Transition nurse and Continuing Healthcare (CHC) Transition nurses are also new to post in the last 6 months and are working closely to ensure a smooth transition for young people moving from Children's CC to Adult CHC.

There are positive educational outcomes for pupils with SEND. In 2023, the percentage of SEN Support pupils achieving a good level of development in EYFSP increased by 9% points to 29% - returning to pre-pandemic levels. Solihull ranked top among its statistical neighbours and in the top quartile of local authorities in England. The percentage of SEN Support pupils reaching the expected standard or higher in writing at KS1 in 2023 was 24% - the largest proportion among statistical neighbours. 27.6% of KS2 SEN Support pupils achieved the expected standard or higher in reading, writing and maths (combined). As in previous years, this was well above the England average and SEN Support pupil performance was particularly strong in reading and maths. KS2 progress scores for both SEN Support and EHCP pupils mostly remained above the England average – although there is now more to do to increase KS1 and KS2 attainment for EHCP pupils.

Solihull's average Attainment 8 score for SEN Support pupils was greater than the statistical neighbour, regional and England averages in 2023, and at 35.4, it was the second highest among local authorities in the West Midlands. Whilst the average Attainment 8 score for EHCP pupils in Solihull was lower than the statistical neighbour average, at 14.3, so there are improvements to be made - but it was greater than the England average and was the third highest among local authorities in the West Midlands. The average Progress 8 score for SEN Support pupils is in line with statistical neighbour and England averages, but below the West Midlands average. In 2023, 44% of SEN Support pupils achieved at least a grade 4 in English and Maths at KS4, placing Solihull in the top quartile of local authorities in England. Over the last 3 years Adult Social Care (ASC) have been undertaking a focused project approach to improve uptake of people with learning disabilities and identified social care needs into employment, which includes people transitioning from Children's Services support into Adult Social Care. The group is led by ASC, formed across a broad spectrum of services, third sector support, community groups and associated stakeholder and partners. Across a series of initiatives, results have been very encouraging and subsequent returns have improved significantly. These include: recruiting to a specialist role of Supported Employment Coordinator in ASC to develop, liaise and progress case work with residents, families and partners; close strategic work with the Employment and Skills team to maximise opportunities and bets use of Council resources, and to devise and implement council-funded part-time supported employment posts, demonstrating the Council as a practice leader; close work with providers and third sector in support arrangements and commissioned activity; close work across stakeholders and a successful bid with DWP for Local Supported Employment offer which is now well underway and showing positive results. Further planned work includes more focus around in-reach to schools and educational establishments, profile and offer raising with stakeholders including children, adults and families, and consolidating a Disability Confident approach with Solihull Employers.





## Case study: Salmaan

After completing his Supported Internship, Salmaan was interested in getting more experience in the workplace while looking for long-term employment.

With a system migration project underway, our Employment and Skills Team needed extra help for the administrative work. This would be a good opportunity for Salmaan to get more practical work experience and solidify the new skills he had learnt from the internship. To help him with this transition, we assigned a job coach to assess his needs and whether adjustments would be needed. The team only had to ensure that the office building was accessible and that a mentor would be in for the Salmaan's working day.

Salmaan joined the team in April for work experience. He enjoyed his work and conversation with his teammates. He found everyone helpful and supportive. He shared: "Getting to the office is already an achievement for me, and becoming more independent at work is another achievement that I had never even imagined!"

His manager recalled that Salmaan was quite shy at first but came out of his shell gradually. He shared: "Making adjustments for team members with additional needs is just about learning and adapting. Salmaan always brightens up the office with a big smile on his face. He is a loyal and valued member of our team. The team get to develop people and our team spirit has become stronger. It is a win-win for everyone!"

Salmaan secured a paid role within the Council in 2024.



## Children and young people are valued, visible and included in their communities

## Key areas that are working well

**The quality of Education Health Care Plans remains a priority for the partnership.** In 2018, only 8% of EHCPs were graded as good or outstanding, using our internal Quality Assurance Framework; in June 2024, this increased to 91%.

Solihull Parent Carer Voice collate **feedback** on parent views, including on EHCPs, and their latest survey results verify the internal quality assurance position that the plans are improving.

General Practitioners (GPs) are often the primary source of support for parents and carers when their child or young person faces difficulties at school. The GP SEND handbook provides essential guidance for GPs on how to assist children, young people, and young adults with Special Educational Needs and Disabilities (SEND) and their families. It outlines the key role of GPs in offering support, providing advice, and directing families to trusted resources. The aim is to empower GPs with practical strategies to address concerns, facilitate access to appropriate services, and foster effective collaboration between families, schools, and healthcare providers. In addition to this there is a newly agreed quarterly SEND slot at the General Practice network meeting. To provide key messages, guality information in relation to SEND and Inclusion. The first SEND slot took place in July 2024.

Short Breaks have been reviewed by the Children's Commissioning Team in partnership with SPCV. Targeted short breaks options have significantly increased for children and young people with disabilities providing positive activities after school, evenings, weekends and during school holidays. In 2022, 229 children and young people attended targeted short breaks, and this increased to 320 in 2023 following the introduction of a new short breaks grants programme. The Short Breaks Grants programme was further expanded from January 2024, and between January – April 2024, 281 children and young people have attended targeted short breaks.

A Council team are dedicated to supporting children and young people with SEND to travel safely and independently to their education or employment setting. This includes direct support for individuals as well a 'train the trainer' programme for staff in schools and colleges so more young people can access the training. It is well received by families due to its flexible and individualised approach. For children and young people with a visual impairment we commission Guide Dogs for the Blind to deliver habitation and independent skills support to promote independence for this group of young people.

## Success Stories: HAF Programme 🔊

#### 2023/24 Overview

3734 unique children took part- (3053 primary aged and 681 secondary aged).

25% of those children attending have identified as having SEND needs which is aligns closely with the profile data.
90% of children in receipt of FSM.
10% of children attended as a result of a professional referral.
43 different providers across the borough.

#### This video gives an overview of the HAF programme,

featuring interviews with parents, staff, and footage from a number of the different providers and settings children and young people experience.





## Inclusive Music groups

During 2023-24 Solihull Music has FREE weekly music sessions for 63 children and young people with additional needs .

Our groups aim to provide a safe, inclusive space for all young people with additional needs to access and enjoy, developing inclusive musical communities for families, with a focus on giving a voice to children and young people with additional needs.

Click here to find more about more about our local SEND music offer.







Success Stories: Young People's Voice 🐋

Our Voices Heard presented a children and young people's Deputation

to a meeting of Full Council on 7 February 2023. You can view the recording

of their deputation here.

Living in Solihull - Connor, Antony, Conor and Jake; with Harvey, Akram and Williams support





### Alternative Provision

### Key areas that are working well

There has been an increase in money spent on Alternative Provision over the past 3 years to increase options and places, particularly at secondary. The primary offer is still being developed and the building works are anticipated to complete in November 2024 to be able to offer Tier 2 and Tier 3 placements for Key Stage 1 and Key Stage 2 pupils.

Investment in AV1 Robots has enabled more children to successfully transition, or increase their engagement, in school and classroom learning. We are now in the process of doubling the number of machines available to loan to schools for individual children who are struggling to physically access their education (mainly due to mental health needs) given the increasing demand for this support due to its success.

Alternative Provision strategic principals have been co-produced following a review in Autumn 2023. The Local Area decided not to have a separate strategy but to ensure they were a core part of existing strategy and priority work that exists. An engagement page 'Your Voice Solihull' has been created to gather views and feedback from across the local area.

Ensuring the quality of the provision that the Local Authority commissions for children and young people was part of a rapid improvement plan for AP in the summer term. Every provider has had a visit from across the directorate with action plans and follow ups where needed. A 2-year cycle for quality assurance is now being put in place for 2024/5 academic year and will be shared with schools so that along with their own checks, we can share information. School leaders told us that the offer for Alternative Provision was unclear, so improvements have been made to address this to ensure that children get the right support at the earliest opportunity.

We have published a LA commissioned AP offer guide, which will be updated annually. A robust decision-making panel was implemented in February "The Single Panel for AP" which provides one front door for all LA commissioned alternative provision and ensures children cannot fall through the gap of multiple pathways.

Membership includes Health, Education, Social Care and school leaders to review referrals and to place appropriately across the system, also increasing system ownership. This is a new system and everyone agrees to its use but work still needs to be done to streamline the process and is ongoing.

'Thank you very much for your response. Yes, someone did contact me a few minutes after I wrote to you this morning confirming the details.

Both myself and \_\_\_\_\_ Mom, \_\_\_\_\_ would also like to say thank you and the staff at Blackwater. \_\_\_\_\_ really enjoyed attending and is going to miss the school so much. The staff supported \_\_\_\_\_ at a difficult time for him and our family and you all left a great impression on him. We really hope he's going to use the lessons learnt and encouragement he's received from you all to do well in his new school. We really hope Blackwater can help so many children like \_\_\_\_\_ to get back on the right path.'

Letter from parent to Headteacher at one of Solihull's AP providers

# Case Study: Successful return to school following an exclusion

### Background

- Jay was 13 and attending a local Solihull secondary school, this
  was his second school following suspensions. There was wider family
  support from partner services taking place at the time and school
  were experiencing changes to the way that he was presenting day
  to day in school and lessons
- Due to family circumstances, Jay went from living with his mum to living with his dad
- 3 suspensions logged for persistent disruptive behaviours.
- Jay was permanently excluded for a one-off incident of a physical assault against another pupil
- Family support worker, The Right Path and Education Inclusion Services all involved at the point of exclusion
- The exclusion was upheld at Governors panel
- Jay had experienced uncertainty in both school and home during his early secondary school career

### Plan and outcomes

- Jay was put on the Saturn waitlist protocol which meant that he was provided with tutoring and support from the Solihull Academy AP team
- Jay engaged well with the programme and the staff had enough evidence to present to secondary heads at FAP to secure onward destination

- He was put forward to FAP around 2 months post the exclusion and a secondary school was named
- Jay started at this new school in March 2024 with support from the Saturn Outreach Programme which included mentoring for 4 weeks. The school were really welcoming to Jay and together with the Saturn

team supported a successful reintegration

- Now a term on, attendance is 99.25%, no suspensions on his record and Jay is reported as very happy and settled and doesn't appear to have any further needs from the wider team and is now single rolled at his new school
- \*Name has been changed



## Key Areas of Development

- Embed the new **Early Help** and early intervention offer so more children and young people can get the right support at the right time for them; linked to the development of the family hubs and team around the school approach
- Continue to operationalise joint commissioning arrangements and evaluation of health services to ensure provision and performance is improved to better meet needs and service demands, and enhance the experience of children and young people
- Reduce health waiting lists, working towards implementation of a more graduated approach to meeting need, from prevention to specialist treatment. Evaluate the Support Whilst Waiting offer based upon feedback of children's, young people's and family's experiences
- Implement a Transition Support Worker pilot to improve young people's (and their family's) preparedness for the transition process into their adult lives
- Increase children and young people's input to their reviews so they can actively participate in decisions which affect them
- Work with school leaders to better understand the provision and resources required to further reduce exclusions
- Develop a well understood **Alternative Provision** offer which successfully meets children and young people's needs; increasing tiered provision and oversight of outcomes







## Key Areas of Development

- Continue to **build capacity in schools** to successfully meet a wider range of SEND needs and enable more children and young people to receive the right help at the right time within their community increasing the provision within mainstream schools whilst ensuring specialist provision is available locally for those who need it
- Develop peer support for schools to improve their SEND offer and increase the consistency of children and young people's experiences across the borough; including the timeliness of EHCP reviews
- Plan and deliver an inclusive and robust offer for **post-16** which effectively responds to the increase in demand for places within young people's local community
- Develop and embed systems to consistently measure the impact of the local area partnership on children and young people's experiences and outcomes
- Development of **new model of care for children and young people's mental health**, with a specific focus on addressing health inequalities, support for vulnerable children and support for parents and carers.
- Continue to work with school leaders and parent carers to identify opportunities for improving the financial sustainability of the SEND system alongside the consistency of outcomes for all





