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**23 June 2021**

Carol Cammiss  
Director of Children's Services,  
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Shute End  
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Sally Murray, Head of Children's Commissioning and the DCO  
Jo Jolly, Local Area Nominated Officer, Wokingham

Dear Ms Cammiss and Ms Murray

### **Joint local area SEND revisit in Wokingham**

Between 11 May and 13 May 2021, Ofsted and the Care Quality Commission (CQC) revisited the local area of Wokingham to decide whether sufficient progress has been made in addressing each of the areas of significant weakness detailed in the written statement of action (WSOA) issued on 29 April 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 local area's practice. HMCI determined that the local authority and the area's clinical commissioning group (CCG) were jointly responsible for submitting the written statement to Ofsted. This was declared fit for purpose on 3 September 2019.

**The area has made sufficient progress in addressing five of the six significant weaknesses identified at the initial inspection. The area has not made sufficient progress in addressing one significant weakness. 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 local area in addressing the six significant weaknesses identified at the initial inspection, including the area's improvement plans and self-evaluation.

## Main findings

- At the initial inspection, inspectors found that:

**The area lacked a clearly communicated co-produced strategy and accompanying action plans that are shared and understood across education, health and care in the local area and are sharply focused on improving the outcomes of children and young people with SEND.**

Wokingham now has an ambitious SEND strategy. Leaders across health, education and care have worked with the parent carer forum and voluntary organisations to ensure that the strategy is focused on improving outcomes for children and young people with SEND.

Leaders are focused on identifying and resolving both long-standing and immediate difficulties across the local area to improve provision. While developing the strategy, leaders uncovered problems in the system that were impacting on the quality of support that children and young people received, for example making sure that the specialist placements available in the area match the needs of children and young people. Although stopping to 'fix' these issues slowed progress, this process has resulted in firmer foundations on which to build the new ways of working.

Leaders know that many parents lack confidence in the current support for children and young people with SEND and want to address this. To secure greater parental confidence, leaders have sought high-level commitment to the SEND strategic plan across education, health and care. Elected members in Wokingham are committed to improving outcomes for children and young people with SEND.

Leaders know that they still have work to do to ensure that improvements are consistently experienced by children and young people with SEND.

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

- At the initial inspection, inspectors found that:

**There were weaknesses in the timeliness and quality of EHC plans.**

Education, health and care plans (EHCPs) produced since the last inspection are improved. Work carried out to ensure that plans are produced on time has allowed the whole process to improve. This means that most EHCPs are now completed within statutory timescales.

Targeted actions have addressed the backlog of requests for EHCPs that had built up over time.

Some partners also monitor the quality of the reports that contribute to the plans. For example, some health services now check the content of every report. As a result, practitioners told us that they are more confident in writing reports and getting the right advice and support when contributing to an EHCP.

Even though the process for writing new EHCPs has improved, more work is required to develop the confidence that parents have in the process. Many parents told us that the EHCP system is not yet good enough. Parents say that frequent changes in staffing are detrimental to the quality of communication they receive. Leaders are aware of these issues and have plans in place to ensure that they have the permanent staff they need.

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

- At the initial inspection, inspectors found that:

**There was lack of co-production at a strategic level to inform effective co-production at all levels.**

During our visit, we found a strong commitment to co-production from leaders. Several significant approaches, such as the SEND strategy and graduated response, known as 'Ordinarily Available', have been effectively co-produced. SEND Voices, Wokingham's parent carer forum, and representatives from the voluntary sector were centrally involved in the development of the co-production charter and felt their input was valued throughout the process. The co-production charter guides the planned approach and has been signed-up to across education, health and care.

Co-production is central to the longer-term plans for delivering the SEND strategy. Partner agencies are committed to this approach and its roll out.

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

- At the initial inspection, inspectors found that:

**There were weaknesses in the quality of management information to inform accurate evaluation and energise service improvement across the local area.**

Since the initial inspection, leaders have a better understanding of what they need to do and prioritise because they have extended and strengthened the range of information available to them. A good example of this can be seen in the monthly performance dashboard produced to track the timeliness of EHCPs.

The area is beginning to secure the information they need to tackle areas beyond those identified as weaknesses in the last inspection. The sharing of information across care, health and education identified some concerns that had not previously been identified. For example, the area now has a greater understanding of the needs of children and young people with autism

spectrum disorder and social, emotional and mental health needs. This has resulted in work to improve the support available to them at every level.

The SEND strategy contains a comprehensive range of performance and success measures to track the impact of the strategy on the quality of provision for children and young people. Leaders now need to ensure that their use of information consistently identifies upcoming needs while continuing to be sharply focused on improving outcomes for children and young people with SEND.

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

- At the initial inspection, inspectors found that:

**There was a lack of well-coordinated and effectively joined-up work across education, health and social care.**

Joined-up working across health, education and care has improved since the initial inspection. The review of the current support available for children and young people with SEND resulted in a co-produced graduated response known as 'Ordinarily Available'. This sets out the expectations for joint working between health, care and education professionals in Wokingham.

The review found that parents and practitioners were not always aware of the existing expertise and support in the area. The 'Ordinarily Available' approach is intended to address this, so that everyone knows what support is provided in the local area.

The greater levels of joint working between practitioners is resulting in the earlier identification of children's needs. Practitioners identify more joined up working between health, care and education during the EHCP process. They say that it feels more collaborative, and that more conversations are taking place about children between professionals: 'It doesn't feel like a tick box exercise like it used to... it is much more holistic.' This is leading to appropriate support being given in a timely manner.

Although practitioners told us of increased levels of joint working, many parents still say that some services don't talk to each other. More work needs to be done to ensure that parents' experience of the process informs the future developments of this approach.

The roll-out of the graduated response has been hampered by the COVID-19 (coronavirus) pandemic, but plans are in place to fully implement the approach across the area.

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

- At the initial inspection, inspectors found that:

**The area had an underdeveloped pathway to enable young people with SEND to make a successful transition to adulthood.**

The quality of transition support for young people with more complex SEND needs has improved since the last inspection. However, this work does not yet cover the needs of all young people with SEND as they move into adulthood.

Effective support is in place for young people with more complex needs and those attending specialist schools as they move to adult services. Since the last inspection, a new transitions team has been created in adult social care. Now transition workers attend all EHCP meetings for young people with social care involvement. This is leading to a better offer of support for young people with more complex needs.

Not all young people routinely receive support in preparing for adulthood. Preparation for adulthood is not a consistent feature of the annual review process for young people with an EHCP. Some parents told us that young people’s social development and their additional vulnerabilities are not always fully considered as they move towards adult life. Many parents also told us that they have to drive the support their child receives, often feeling that they have to lead this rather than being supported by professionals.

**The area has not made sufficient progress in addressing this significant weakness.**

The area has made sufficient progress in addressing five of the six significant weaknesses identified at the initial inspection. As not all the significant weaknesses have improved, it is for DfE and NHS England to determine the next steps. Ofsted and CQC will not carry out any further revisit unless directed to do so by the Secretary of State.

Yours sincerely

**Mr Phil Minns**  
**Her Majesty’s Inspector**

<b>Ofsted</b>	<b>Care Quality Commission</b>
Chris Russell Regional Director	Victoria Watkins Deputy Chief Inspector, Primary Medical Services, Children Health and Justice
Phil Minns HMI Lead Inspector	Tessa Valpy CQC Inspector

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