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Corporate Director of Children's Services  
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Civic Offices  
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Anthony McKeever Accountable Officer, Thurrock Clinical Commissioning Group  
Michele Lucas Local Area Nominated Officer, Thurrock

Dear Ms Murphy and Mr McKeever

### **Joint area SEND revisit in Thurrock**

Between 13 and 15 December 2021, Ofsted and the Care Quality Commission (CQC) revisited the area of Thurrock 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 10 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 area's practice. HMCI determined that the local authority was responsible for submitting the written statement to Ofsted. This was declared fit for purpose on 8 October 2019.

The area has made sufficient progress in addressing all three 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.

The inspection took place on site. Most meetings were held remotely. 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 considered 238 responses from parents and carers, including free-text comments, to the online survey. Inspectors met with leaders and professionals from the area for health, social care and education.

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. They reviewed a sample of education, health and care (EHC) plans, documents and processes for the area's quality assurance processes and arrangements and records about the oversight of provision for children and young people with SEND.

In reaching their judgements, inspectors took account of the impact of the COVID-19 (coronavirus) 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:

**Inaccurate and incomplete records, and ineffective oversight mean that leaders did not know the whereabouts of some children and young people and what provision they have.**

To improve oversight, area leaders have invested significantly in staffing and resources. Information and recording systems have been overhauled and revised. There is now a single database that enables leaders to know where children and young people up to the age of 25 are in education, employment or training. Leaders make additional checks to ensure the safety and well-being of those children and young people with SEND who are not in education, employment or training (NEET).

The proportion of children and young people with SEND who are NEET is low. The number of young people with SEND who are NEET is reviewed on a monthly basis. This information is used to facilitate regular meetings with these young people where they receive support and guidance regarding opportunities for employment, apprenticeships, supported internships and independent living. Leaders have ambitious plans to help more children and young people with SEND to move into employment or training, or continue with their education. Leaders have worked with local further education colleges to provide a wider range of courses for young people with SEND. These courses prepare young people with SEND for adulthood, independent living and higher levels of study.

Leaders have secure oversight of those children and young people with SEND who are educated at home, who are following part-time timetables or who are placed outside of the borough. There are established processes now in place to

evaluate the quality of provision for these children and young people with SEND, including checks on their well-being.

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

- At the initial inspection, inspectors found the following:

**Quality assurance is not rigorous enough to ensure effective governance and oversight across the provision and services for 0 to 25-year-olds with SEND. Leaders are reliant on working relationships rather than processes. Leaders are over reliant on the limited information given to them by educational providers about the quality of the provision that they purchase.**

There has been a step change in area leaders' approach to governance and oversight. Leaders from both the local authority and CCG have established a holistic approach that is centred on achieving improved services, provision and outcomes for children and young people with SEND. Leaders across health, social care and education have developed processes and procedures for the quality assurance of services and provision that were not in place at the time of the inspection in 2019.

There is strong oversight from the local authority and the CCG. Improvements have been driven by the multi-agency SEND improvement board which is chaired by the director of children's services. Leaders now share important information about how different services perform. This ensures that leaders from health, social care and education can monitor performance and mutually challenge one another.

There is greater accountability for the quality of provision for pupils placed in schools both in and out of borough. Quality assurance frameworks have been established. A regular system for quality assurance visits to specialist provision and commissioned places both in and out of the borough has been established. As a result, leaders have a more accurate view of the quality of provision and how well it meets pupils' needs.

Leaders know that parents' views of the quality of SEND provision across mainstream schools in the borough are variable. Leaders use information about school performance to identify those schools where additional challenge and support are required to improve provision and outcomes for children and young people with SEND.

The newly established parent carer forum (PCF) is involved in quality assurance of the local offer website and is an advocate for an increasing number of the families of children and young people with SEND. The area's SEND engagement strategy provides opportunities for leaders to capture and act on the views of children and young people with SEND and their families. Some activities have had significant numbers taking part, while other activities have met with few responses. Both the PCF and area leaders recognise they are not yet reaching

fully the diverse community of parents and carers of children and young people with SEND in Thurrock to ensure that they have their voices heard.

Area leaders recognise that although progress has been made in all areas, there remains work to do to ensure that children and young with SEND and their families universally feel the impact of the improvements continuing to be made. Leaders are committed to maintaining the pace of improvements and investing in the area's provision for children and young people with SEND. This is essential if they are to reach a much greater proportion of families and children and young people with SEND across Thurrock so that they feel the benefit in their everyday lives.

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

- At the initial inspection, inspectors found the following:

**EHC plans and the annual review process are of poor quality. The local authority has no system in place to make sure that relevant professionals and services are notified when EHC plans need reviewing or updating. Professionals are not routinely informed of requests to submit written information within specified timescales. Too often, EHC plans are out of date and do not accurately reflect the needs or views of children and young people, or the views of their families. The information from EHC plans and annual reviews is not used to inform the commissioning of services, particularly, but not exclusively, for young people between the ages of 19 and 25 years.**

There has been an improvement in the quality of EHC plans. The more recent plans accurately reflect the views, aspirations and needs of children and young people and their families.

Leaders have improved procedures to request information from professionals. Contributions from professionals are timelier and more relevant. Processes have been put in place to quality assure contributions to EHC plans and the plans themselves. This includes multi-agency quality assurance and auditing of plans.

The designated clinical officer (DCO) is heavily involved in the quality assurance process. The DCO has provided training and drop-in clinics for SEND case workers and special educational needs coordinators to improve their understanding of the health sections of an EHC plan and what effective health provision and outcomes look like.

The information from EHC plans and annual reviews is being used, alongside information from quality assurance of other services, to identify services to jointly commission. For example, to develop independent living skills, the area has jointly commissioned Thurrock Autistic Community Together (TACT) to support children and young people with complex autism spectrum disorder. The North East London Foundation Trust has been commissioned to provide an intensive support service for children and young people in mental health crisis who are

being supported in their own homes. Longer-term continuing care packages for children and young people with the highest levels of need are jointly funded and commissioned on an individual basis.

Leaders recognise that, while improvements have been made, there is still some variability in the quality of EHC plans that needs to be addressed. Not all of those involved in the quality assurance processes are consistent in their approach to the review of EHC plans. Leaders also know that not all professionals are involved in the EHC process as well as they should be. For example, some are not given the opportunity to review their contribution in draft plans to ensure that the provision is correctly identified.

The number of annual reviews of EHC plans completed within the expected timescales has increased. Some parents and carers are positive about this. These parents and carers feel that the quality of EHC plans has improved and that the provision better meets the needs of their children. This is not yet as commonplace as it should be. Some parents and carers are still frustrated by annual reviews that are late or do not take place, and that amendments to EHC plans are not considered in a timely manner or effective way.

**The area has made sufficient progress in addressing 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

Paul Wilson  
**Her Majesty’s Inspector**

<b>Ofsted</b>	<b>Care Quality Commission</b>
Lorna Fitzjohn Regional Director	Mani Hussain Deputy Chief Inspector, Primary Medical Services, Children Health and Justice
Paul Wilson HMI Lead Inspector	Andrea Crosby-Josephs CQC Inspector

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