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3 December 2019

Steve Crocker Director of Children's Services Isle of Wight Council County Hall High Street Newport PO30 1UD

Alison Smith, Managing Director, Isle of Wight Clinical Commissioning Group Tracey Sanders, Local Area Nominated Officer, Isle of Wight Council

Dear Mr Crocker and Ms Smith

Joint local area SEND inspection in Isle of Wight

Between 25 November 2019 and 29 November 2019, Ofsted and the Care Quality Commission (CQC) conducted a joint inspection of the local area of the Isle of Wight to judge the effectiveness of the area in implementing the disability and special educational needs reforms as set out in the Children and Families Act 2014.

The inspection was led by one of Her Majesty's Inspectors from Ofsted, with a team of inspectors including an Ofsted Inspector and a Children's Services Inspector from the Care Quality Commission (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. They visited a range of providers and spoke to leaders, staff and governors about how they are implementing the SEND reforms. Inspectors looked at a range of information about the performance of the local area, including the local area's self-evaluation. Inspectors met with leaders from the local area for education, health and social care. They reviewed performance data and evidence about the local offer and joint commissioning.

This letter outlines our findings from the inspection, including some areas of strength and areas for further improvement.

Main findings

Children and young people with SEND are getting an improving deal on the Isle of Wight. Leaders across education, health and care are committed to tackling





the historically poor support that these children have received. Fuelled by this commitment, leaders are working together to ensure that children's needs are identified early and that they receive the support they need. These developments are leading to better outcomes for children and young people with SEND.

- Leaders on the Isle of Wight are working well together. They have a good understanding of what is going well for children and young people with SEND. Leaders also know exactly what needs to get better. As a result, there is a shared understanding of the things that need improvement across most services. Some schools on the island are not as involved in the work of the area. This limits the support on offer to the children and young people who attend these providers.
- Education, health and care leaders have a good understanding of the local area. They are aware of the impact of previously weak services. This knowledge, combined with effective self-evaluation, has produced a way of working that is tailored to the needs and requirements of the Isle of Wight. The current review of special school provision is a good example of this, as it recognises the importance of educating children and young people close to their homes. This is a challenge, as most other areas can take advantage of provision in neighbouring localities.
- The inspection found three main areas that need to improve, all of which have been identified by leaders:
 - Area leaders are committed to putting the needs of the child at the heart of their work. However, the area is not effectively communicating this directly to parents and carers. This means that some parents are not confident that area leaders are listening to them and have a genuine desire to get things right.
 - Children and their parents are not always able to influence the support they
 receive. While there are some very good examples of this process, known as
 co-production, it is not a consistent experience for all.
 - Education, health and care (EHC) plans have improved and now consistently contain the information they need. However, the targets they include are often too imprecise and older plans are not always kept up to date. In some cases, this is leading to a lack of parental confidence that children and young people are receiving the support they need.

The effectiveness of the local area in identifying children and young people's special educational needs and/or disabilities

Strengths

The early identification of SEND in babies and young children is strong. This is because the area delivers the full Healthy Child Programme. Regular contact with health professionals means that children's emerging needs are identified in a timely way. Not only does the area provide a good service to these children and





their families, but leaders also use what they learn to improve what they do. For example, an awareness of children's increasing speech and language difficulties led to targeted training for all health visitors so that they can more effectively support families. Another example can be seen in physiotherapy services, where a screening process has been recently introduced for babies who are born early or have a disability. This is resulting in much earlier diagnosis of needs and enables therapy to start at the earliest opportunity.

- There is a well-established model of early help on offer to children and their parents. This is developing its focus on the needs of children and young people with SEND. The needs of the whole family are taken into account in this process and there are clear pathways that take families on to greater levels of support, should they need it. A feature of the early help work is the close relationships between the professionals who are working with families. A successful example of this support was seen in a school operating a monthly drop-in for parents to meet informally with a range of professionals. Parents described this as a great way to get the advice and information they need.
- Until recently, many schools on the Isle of Wight were underperforming. As a result, the needs of many pupils with SEND were not picked up. This situation is improving. Most schools now work in partnership with other services to make sure they have the knowledge they need to quickly and accurately identify children's needs. A good example of this is the training offered to all schools to help staff understand why some pupils behave in the way they do. School leaders are clear that this training is improving the quality of education on offer in their schools. This partnership approach is developing a proactive culture where the needs of pupils with SEND are more likely to be given the consideration they deserve.
- Services across education, health and care are improving the way that they work to ensure the early identification of the needs of children and their families. This is part of the area's drive to make sure services fit the needs of children and their families. For example:
 - Practitioners work together, and with parents, to ensure a young child with a disability gets the support they need without having too many adults involved.
 - In response to the needs of children with cerebral palsy and other neurological conditions, the physiotherapy team has organised training on postural management, which had been accessed by a range of different professionals, as well as by parents.
- The area is increasingly effective in identifying and supporting children and young people who may have autism spectrum disorder (ASD). Clear pathways are now in place for diagnostic assessment and a good range of parental support is beginning to be available. Family centres run specialist workshops and events for parents and children. The range of training available to all schools, combined with increasing support for children's emotional health, is improving the way that all services in education, health and care are meeting the needs of children with





ASD and their families. However, there is more work to do to commission postdiagnostic support and reduce the time it takes for formal recommendations to reach schools and parents.

The improving early identification of needs is resulting in increasingly wellinformed EHC plans. Plans are consistently informed by contributions from relevant professionals and take account of the views of children and their parents. The number of children and young people who get the help they need without an EHC plan is growing. This is a very positive indication of the improvements taking place across the area.

Areas for development

- Leaders across the area are not routinely working with parents, carers, children and young people to strategically co-produce services. Currently, there is an over reliance on consultation and not enough working together. There is evidence of some effective co-production, such as the inclusion of the parent carer forum in the development of the Special Education Needs and Disabilities Place Strategy. However, the lack of routine co-production means that services are developed without contributions from the children and young people who will use them.
- Older EHC plans are not always kept up to date. Plans are not routinely updated following annual reviews to ensure they accurately reflect the child or young person's current needs. Although this doesn't mean that children and young people are not getting the help they need, it does limit the confidence of some parents and carers.

The effectiveness of the local area in meeting the needs of children and young people with special educational needs and/or disabilities

Strengths

- Families who have a new baby with a lifelong disability are supported well through a care and support package delivered by teams of professionals across education, health and social care. Professionals work well together to ensure that parents and carers are not overwhelmed by the number of appointments and practitioners involved.
- Young children are effectively supported when they start in early years settings. An individual approach is developed by a multi-disciplinary team that includes the new setting's special educational needs coordinator (SENCo). This ensures that all arrangements are in place and that the child is given the support they need from the start.
- A strong feature in early years provision on the Isle of Wight is the availability of training for professionals working with young children with additional needs. For example, the area has adapted a national programme to increase children's





attention and over 75% of early years settings have taken up this training. Another example can be seen in the way that the portage service has changed its approach to ensure that it is able to meet the needs of more families with children who have additional needs. The quality of support and training on offer to early years settings is increasing the ability of practitioners to offer good support to children with SEND.

- Families with children who have additional needs can access support through the family centres that operate across the island. In addition to the range of workshops and programmes at the family centres, the parent carer forum has organised training on 'hot topics' such as the EHC annual reviews, education psychology, sex and relationships education, as well as funding the recent and very popular neurodiversity conference.
- A good range of short breaks are on offer, accessed through the Gateway Card. Parents and children are positive about opportunities such as the holiday lodges, football clubs and tree climbing. However, many parents and carers are unaware of the full range of activities available locally. A lack of co-production has resulted in not all families feeling that their needs are met through the short break offer.
- Most education leaders work closely with other leaders in the area to ensure that children and young people with SEND get the support they need. Those education settings that engage with the local authority advisory team are very positive about the advice and support they receive. Activities such as the regular opportunities for school SENCos to share and discuss the challenges they face, facilitated by the educational psychologists, support improvement in SEND provision in schools. Mainstream schools value the outreach support provided by special schools. Most school leaders value the area's commitment to improving the education all children and young people receive. This shared commitment is enabling schools to be more inclusive. Where schools are not sufficiently engaged with other leaders in the area, children's needs are less likely to be met well.
- Vulnerable children and young people with SEND are well supported in the area:
 - The area is vigilant to the changing needs of looked after children, commissioning new services to address their emerging needs. For example, a new service has been introduced specifically to support those children who are looked after and placed with their parents.
 - The youth offending service has well-established links with the Special Educational Needs and Disabilities Information, Advice and Support Service (SENDIASS) and all staff have completed training to help them better support children and young people with social and communication difficulties.
 - The siblings of children with SEND have their needs identified and met. The impact of a sibling's disability is part of the assessment made by children's social care. Sign language tuition is delivered at the weekend so that siblings can attend.





- A good speech and language therapy service is offered on the island. The service is provided jointly by the NHS and local authority. A strong core offer is available to all schools that includes training to enable staff to be more effective in the support of children with speech, language and communication needs. This core offer also includes the provision of a parent workshop. However, many parents are confused by the speech and language provision on offer and some do not know what support their child is receiving. This is acknowledged by the team, who recognise that there is still more work to do to improve communication with parents and carers.
- Children and young people have good access to a wide range of emotional and mental health services. A range of primary mental health care initiatives, such as the 'Think Ninja' phone application, are helping to make sure that support is available at an early stage. The child and adolescent mental health service (CAMHS) is able to see people quickly and offer interventions where needed or will signpost on to other services. Group work such as 'Timid to Tiger' and the Self Esteem Group, run by CAMHS, is an effective way of meeting the needs of children and is positively evaluated. Children in crisis can be seen by the inreach/outreach team and daily risk review meetings provide oversight of decision-making to ensure that these children receive the most appropriate care. The clinical commissioning group (CCG) recognises that there is a gap in CAMHS cover over a 24-hour, seven-day week, as recognised as best practice, and is currently exploring options.
- Most parents are happy with the current support their child receives in school. However, many parents also describe previous poor provision. This reflects the ongoing improvements taking place in schools on the island. One parent spoke for many when describing how a change in a mainstream school placement had resulted in a dramatic change in her child's behaviour within a few weeks and how this had a positive impact on the whole family.
- EHC plans are providing sufficient detail to enable children and young people's needs to be met. There is a high level of consistency in all parts of the plan. This means that, for example, the views of children, young people and their parents are reliable contributions to the plans. Good processes are in place for therapy staff to provide advice, and practitioners are able to comment on draft plans before they are finalised. In some cases, however, plans are weighted towards education and lack sufficient detail about children and young people's health and care needs. This reduces the likelihood of plans effectively supporting young people's transition into adulthood.

Areas for development

The way that children and young people move between different health providers at points of transition needs to improve. There are some isolated helpful examples but nothing strategic and consistent. We saw some good examples of local services supporting transition into adult services. Young people with





diabetes and cystic fibrosis are supported well through transition clinics. The cystic fibrosis clinics are held on the island, which means they are more accessible. The local hospice now employs a transition nurse. However, poor access to GPs makes transition to adult health services for young people with SEND more problematic.

- Leaders are aware that they have been slow to plan and deliver services in a joined-up way, known as joint commissioning, for children and young people with SEND across education, health and care. The newly formed Child Health Joint Commissioning Group is making good progress across its three priorities. There is also good progress being made in defining the needs of children's emotional and mental health, with evidence of a range of interventions being commissioned and available as part of the area's Transformation Plan. However, the lack of joint commissioning has resulted in some services being limited for a number of years. For example, the provision of occupational therapy support and wheelchair services is still not meeting the needs of children, young people and families.
- Some parents of children and young people with SEND lack confidence in the system because leaders do not ensure that all families are well informed about how support for their children works. Parents report that there is too much variability in provision. Some parents are not confident that, without an EHC plan, their child's needs will be met. Others are concerned that EHC plans are not specific enough. In schools where the SENCo role is strong, parents have greater confidence in the area's ability to meet their children's needs. However, some parents are not confident that their children receive the support they need or that school staff understand the needs of their child. Those parents who have access to the right information have more confidence in the system.

The effectiveness of the local area in improving outcomes for children and young people with special educational needs and/or disabilities

Strengths

- Most children and young people with SEND feel happy and are making progress. Many told inspectors of the recent improvements they had experienced in the quality of education they receive. One summed this up by saying that, 'Because school is now more interesting, behaviour and attendance had improved'. Pupils have access to a range of social, cultural and education opportunities, including theatre trips, visits to museums, sporting activities and art events. Older students felt they were given the life skills they need, including cooking skills and independent travel.
- Educational outcomes in primary and secondary schools on the island have been lower than national averages for all pupils, including those with SEND, for some time. Although academic results remain below average for most pupils with SEND, they are steadily improving in all areas. Improvements have been particularly strong for the youngest children. Effective early identification, strong





support and well-thought-out transition arrangements are leading to more children with SEND achieving a good level of development in the early years foundation stage. In schools, outcomes are improving as a direct result of the more effective support that pupils receive. Many children and young people are positive about the additional support they receive, saying this helps them to stay on track with their learning and make progress. The support and training provided by the local authority are helping schools to develop their practice and improve outcomes for children and young people with SEND. This support is valued by many schools and is bringing about positive change in the way schools meet needs and work with parents. Experienced SENCos could describe the improvements in provision following, for example, the 'SENCo circle' activities. School leaders describe the training for staff as having a direct impact on the quality of care and support pupils in the school receive.

- Outcomes for older young people are strong. This is because they are well supported and have access to a good range of vocational courses that closely match the employment opportunities available. Many parents are positive about this provision for young people. Almost all young people with SEND go into education, employment or training as a result of the good support and advice they receive. The local council is a big employer in the area and provides opportunities for supported internships. There is an emphasis in college on independent living skills. Supported accommodation has been identified as an area that needs to improve and, as a result, 32 new places were created in 2019 with a further 23 planned for 2020. However, not all young people have opportunities to develop friendship groups and participate in regular activities. While a range of activities are on offer, the lack of co-production means that they do not always meet children and young people's needs. Limited communication also means that young people and their families are not always aware of the support that is available.
- The outcomes of vulnerable children and young people with SEND are improving. This is through the combined efforts of schools and the local authority's virtual school. The virtual school works in partnership with schools to monitor the progress pupils make and provides targeted training. The monitoring of these pupils reveals that there is now less emphasis on recording challenging behaviour and much more analysis of the possible causes. Examples of good practice include the help school staff have received to better identify pupils' strengths and areas of difficulty when writing a support plan.
- Children and young people with SEND have good attendance at school. Rates of attendance are higher than the average for similar areas. Rates of absence and persistent absence for pupils with an EHC plan have been reducing and are now lower than the national average.
- Parents value the independent advice and guidance they receive from the SENDIASS. Leaders in the area work closely and cooperatively with SENDIASS to





improve provision for children and young people. This is contributing to the positive outcomes that they achieve.

Areas for improvement

- Targets in EHC plans are not always clear enough to focus the support a child or young person receives. When targets are not specific enough, practitioners struggle to evaluate the impact support has had. Also, targets often only focus on educational outcomes. In these cases, not enough consideration is given to children and young people's outcomes in all areas of their development.
- Although fewer children and young people with SEND are being excluded from school, rates are still too high. Increasing collaboration between leaders in the area is beginning to improve this situation as most secondary schools are working together to reduce the likelihood of exclusions for their pupils. These leaders, aware of the limited availability of alternative provision, use a variety of approaches to prevent exclusions. It is important that area leaders continue their work to reduce the risk of exclusion for children with an EHC plan and those receiving SEN support.
- Educational attainment for children and young people with SEND is getting better but needs to continue to improve. Area leaders should continue their work to reduce the variability in school provision that children and young people, and their parents, experience.
- Previously, some parents have chosen to home educate their children because they did not believe the correct provision was available to them in the area. This situation was made worse by the limited communication and co-production. While the situation is beginning to improve, through such things as the 'education other than at school' packages, the needs of all children and young people must be considered when developing new education provision.

Yours sincerely

Phil Minns Her Majesty's Inspector

Ofsted	Care Quality Commission
Chris Russell	Ursula Gallagher
Regional Director	Deputy Chief Inspector, Primary Medical Services, Children Health and Justice





Phil Minns	Lea Pickerill
HMI Lead Inspector	CQC Inspector
Keith Tysoe	
Ofsted Inspector	

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