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Mary Kearney-Knowles, Director of Children's Services, Bath and North East Somerset Partnership

Gill May, Chief Nursing Officer, Bath and North East Somerset, Swindon and Wiltshire Integrated Care Board

Dear Mary and Gill,

Ofsted and CQC visit to the Bath and North East Somerset Partnership

Following the Ofsted and Care Quality Commission (CQC) joint visit to the Bath and North East Somerset Partnership (B&NES), I write on behalf of His Majesty's Chief Inspector of Education, Children's Services and Skills and the Chief Inspector of Primary Medical Services and Integrated Care of CQC to summarise the visit's findings. Thank you for the time you made available to participate in this thematic visit on preparation for adulthood.

Ofsted carried out this visit under a section 118(2) request from the Department for Education. The CQC provided assistance to Ofsted under paragraph 9(1) of schedule 4 to the Health and Social Care Act 2008.

The visit was carried out as part of a thematic review, the outcome of which will be aggregated into a national report to support whole-system improvement. This national report will be published on Ofsted's and CQC's websites. It was not a graded inspection.

Thank you for contributing valuable information. During the visit, we spoke to local area leaders, children and young people with SEND, their families, and the education, health and care professionals who work with them. We examined relevant documents and visited a sample of settings.

Context

The purpose of this series of visits is to aggregate insights about preparation for adulthood arrangements, to learn from existing practice and to identify opportunities for improvement.

You can find more information about how inspectors carried out the visit at:

[Thematic reviews of preparation for adulthood arrangements in local areas - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/news/thematic-reviews-of-preparation-for-adulthood-arrangements-in-local-areas)

Strategic planning

We were told:

- The partnership has developed a clear strategic approach to improving preparation for adulthood (PfA) across education, health and social care. Professionals told us this has strengthened in the past two years, with many changes implemented by leaders now beginning to have an impact on children and young people with SEND. For example, we were told the special educational needs coordinator (SENCO) networks are highly valued and ensures that key information such as the 'PfA fair', 'live well' and 'early help' offer is disseminated across schools in the local area.
- Partnership leaders work proactively with children and young people with SEND and their families and have shared ambitions for an integrated PfA team. The recent strategic review has initiated considerable work on implementing a joint PfA approach. For example, there are two newly appointed specialist transition social workers in adult social care and a SEND information, advice and guidance (IAG) officer.
- Partnership leaders recognise that experiences for children and young people with SEND and their families are variable. They work closely with the parent carer forum (PCF) to improve communication and trust. As such, they are focused on refreshing the SEND strategy, restructuring the SEND team and are due to launch the SEND collaboration programme. They are confident that these changes will make a significant difference.
- Providers are positive about SEND placement planning and how they worked collaboratively with local area leaders to secure funding for a new free school and alternative provision. They would like to see greater co-production and a more proactive approach to developing provision and services together. Providers recognise the pressures on the local area with the increasing numbers of children and young people presenting with SEND for assessment, and access to services that are already stretched.
- The recruitment and retention of sufficiently experienced staff is challenging and can cause delays in preparation for adulthood. This is impacting on teams across the partnership and in settings from early years through to post-16, in particular teaching assistants.

Employment

We were told:

- The partnership provides a range of services that give careers education, information, advice and guidance (CEIAG) to children and young people with SEND. They commission services such as 'youth connect', offering targeted support for young people with SEND at risk of not securing further education,

employment and training. The hospital education reintegration service (HERS) also supports young people at key transition phases. For example, supported visits to post-16 providers and a supportive network where young people can meet regularly.

- Employer relationships are well established in the local area, offering a wide range of work experiences. The local area has initiatives such as 'opportunities for all', a joined-up approach to engaging employers through one point of contact. Leaders are focused on improving support for employers to develop greater confidence in working with young people and adults with SEND, in both paid and voluntary positions. We were told there is an increasing number of job coaches working in schools and an LA job coach to support the access to work programme.
- Special schools work with multiple LAs and talk extremely positively about their experience in B&NES. They work with the local partnership to support children and young people with SEND across the area. An example of this is the specialist autism service (SASS), run by a special school and commissioned by the local authority (LA), which is highly valued by local schools and nurseries. Although leaders in schools also value the relationship with the LA, they say their experience differs to that of special schools and often battle to access services, assessments for children and young people and to secure funding to support children and young people with SEND, with and without EHC plans.
- Children and young people with SEND do very well in both special and mainstream schools in B&NES. Providers and many families told us they are supportive of the local area's 'local first' approach. However, they are frustrated with the range of post-16 opportunities. Most young people transition to the general further education (GFE) college, where they say the range and quality of provision is variable. We heard that young people often repeat learning and regress in independence. Schools welcome greater collaborative working to improve the experiences for young people as they transition into post-16 and 19 education. They believe they have the expertise to improve the system and welcome the LA leading on collaborative working in developing curriculum pathways.
- Special schools work closely with the SEND team, they value the annual destination meeting that is focused on preparing individual young people for transition. They also meet with the SEND team at the beginning of the year to plan annual review meetings, which was particularly helpful when schools had an allocated SEND lead worker. However, this is not the same in mainstream settings for children and young people with SEND. Both special and mainstream schools also told us that annual reviews are not well represented by multi-agencies, even at key transition points. There are particular frustrations with the adult social care team where providers would like to see improved communication, and greater support for young people as they transition from children's services.

- Providers and families would welcome systems for children and young people to 'wait well' whilst going through assessment processes and long wait times for services. For example, providers don't know where the children and young person is within the system, how long it will take and what they need to put in place during the waiting phase. Many schools and trusts are setting up their own services or employing practitioners. However, they expressed concern for children and young people that do not have access to the support they need within their local area. They told us they want to work with the LA to support in coordinating services.
- Local area leaders are committed to developing a greater range of training and employment opportunities for young people, as they transition from education. The local area is focused on building on the successful supported internship programme 'project search' which started in a partnership special school. There are plans to develop a second programme next year with the local GFE. We were told that some trusts are also working with different providers to develop supported internship opportunities.
- The local area is currently piloting the neurodiversity (ND) pathway project. This is in direct response to the wait times for assessing children and young people. They are confident this will improve children and young people accessing the right support including 'waiting well'. They also told us about the many changes since 2021 to ensure that EHC plans are not ceased, where an education, health and care need remains. This is as a result of revised strategies, new panels and greater joined up working across teams, including children and adult services. However, we were told that increasing numbers of families pay for private assessments to ensure the needs of their child are understood, and for providers to put plans in place to support them.
- Providers would like closer partnership working to support children and young people with SEND placed with them. They say often, annual reviews are not supported by multi agencies and welcome a greater understanding of help and support available. They say currently, the early help process is overly complex to access, with uncertainty about the thresholds, and inconsistency in children and young people accepted for support. We were told even when children and young people are accepted for support, this does not guarantee they will receive support.

Independent living

We were told:

- The partnership is committed to creating opportunities to meet the individual needs of children and young people with SEND to live more independently, for example, living at home, in foster care, supported living or shared lives. To meet these accommodation needs, appropriate commissioning is in place that includes capital spend on new accommodation and residential provision. For example, the Englishcombe ND project which will provide 16 new homes.

Engagement with parents, carers and children helps to inform planning for new developments.

- Panel processes are well established to review care planning for all children looked after in children's social care, including children and young people with SEND. The PfA transition panel take into account transition needs. We were told the multi-agency adults transition panel review the needs of children and young people so that care plans can be developed for those moving into adult services. Although, this is not yet consistently in place for all young people with SEND.
- Large caseloads for adult social workers mean that communication with partners and early relationship building with children, young people and their families is not yet securely in place at the earliest opportunity. Leaders recognise the impact of large caseloads and have increased investment so that care planning and transition arrangements can improve. Along with the increased funding for the children with disabilities team, we heard there is investment for the care leaving service, with an increase in personal advisors. Consequently, there is capacity to build earlier relationships for children in care and provide support to care leavers during the important transition period.
- Social workers and personal advisors work closely with other departments, for example housing and adult services, as well as health and education partners to ensure there are clear care plans for children and young people with SEND. As such, young people with an allocated social worker are helped to progress in all areas of their lives.
- Leaders identified gaps in transition planning in children's social care. As a result, system wide improvements have created opportunities to develop practice and ensure that children and young people's needs are better met. An example of this is the extension of the early help offer to young people up to the age of 18 and beyond, where there are exploitation concerns. Leaders across the partnership are aware there is more to do in securing consistently smooth transition plans for all young people.
- Semi-independent and supported care providers contribute fully to care planning and include children and young people in the process. Care providers take into account young people's developmental learning needs so they have the skills to prepare them for adulthood, for example cooking, budgeting, attending college and gaining part-time employment.

Community and inclusion

We were told:

- Live well B&NES is providing a range of information, signposting, resources and activities to support children and young people with SEND to live full and independent lives. Additionally, we were told children and young people have access through school, and locally in their communities, to the Duke of

Edinburgh, army cadets, cycling, a range of sports clubs as well as youth clubs. As a result, children and young people gain social skills and participate well in their communities. We heard the rural nature of B&NES can make accessing groups and facilities a challenge and that there is a need for further opportunities.

- Children and young people with SEND benefit from the breadth of local voluntary sector agencies, providing opportunities such as the Bath area play project (BAPP), 'uproar' and 'welcome to the life' project. Practitioners and families told us they value the 'rainbow resource'. We heard that although young people value the diamond travel cards, there are restrictions around travelling at peak times and wheelchair access.
- Residential care providers support young people well to access activities, for example, going out for meals, going to the zoo, gardening and bowling. Young people are encouraged to develop their own style for their bedrooms and are encouraged to participate in making care environments homely.
- Young people are supported effectively to develop relationships so they can live well in the community. They benefit from stable relationships with a network of supportive professionals who help them to live independently, and to access education and/or work. This helps them integrate and to be valued members of their local communities.

Health

We were told:

- Health and social care partners work collaboratively to support children and young people with mental health and neurodiverse needs, in preparing for adulthood. There are multiple providers all working to secure positive transitions for these children and young people.
- Third sector mental health services such as 'off the record', MIND, 'developing health and independence' play a key role in supporting children and young people with SEND who do not meet adult mental health service thresholds. Statutory services may also over prescribe initially to meet need, and then make a holistic assessment to see where need can be met more appropriately.
- Legislation related to PfA and transitions is very different for social care and health. The legislation for health transitions to adult services and the NICE guidance is open to interpretation by practitioners. For example, it states that adult health services should make 'reasonable adjustment' for young people transferring to adult services, however it is not clear what this means in practice.
- Practitioners find the lack of joined-up systems, processes and recording problematic in B&NES. They told us the IT infrastructure is not always helpful, with systems in place that are not able to automatically share information. The

challenges are both internal and external. However, we heard from leaders there are plans, as part of the planned integrated partnership strategy, to rectify this.

- Adult health care services are not necessarily prepared for young people with life limiting illnesses to live as long as they now do, due to advances in medical science. Commissioned adult services, for example, do not always have the necessary equipment or nursing supplies needed for these young people.
- The length of waiting lists within children's health services is impacting on children and young people receiving the right help at the right time. For children and young people transitioning, there may be a knock-on effect when they try to access adult services. As a result, some young people may end up joining an even longer waiting list.
- A new neurodiversity pathway is being rolled out in B&NES. Health professionals told us this would enable children and young people to access support with targeted assessments, and subsequently reduce waiting times for assessment and access to services.
- Learning disability health checks are carried out in line with national guidance. Practitioners told us the extra time given to these appointments in primary care is the best way to identify any emerging issues which may be occurring for children and young people with SEND.

Next steps

We will use the information we have gathered when writing the national report that sets out our findings. We plan to publish this in Autumn 2024.

Yours sincerely

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