





East Sussex SEND Strategy Inspection Improvement Plan (April 2025)







Introduction

Ofsted and the Care Quality Commission (CQC) undertook an Area SEND inspection of the East Sussex Local Partnership (ESCC and NHS Sussex Integrated Care Board) between 18 - 22 November 2024. The inspection report was published in February 2025 and can be viewed on the Ofsted website East Sussex ASEND Inspection Report.

There are three possible outcomes for an ASEND inspection. For East Sussex we were given the middle outcome: 'The local area partnership's arrangements lead to inconsistent experiences and outcomes for children and young people with special educational needs and/or disabilities (SEND). The local area partnership must work jointly to make improvements.' The next full inspection will be within approximately 3 years. Ofsted and CQC require that the local area partnership updates and publishes a strategic plan based on the recommendations set out in the report.

The report highlights what the area partnership is doing well and identifies what the partnership needs to do better. The inspection identified four areas for improvement (AfI).

- 1. The local area partnership should continue to improve the quality of Education, Health and Care (EHC) plans, so that there is consistent input across all agencies to better identify the provision that children and young people require to meet their needs. This should include: improving joint working of practitioners, particularly health, to contribute to EHC plans; and ensuring a more timely and precise annual review process.
- 2. The local area partnership should take further action to reduce overall waiting times in relation to neurodevelopmental pathways, Child and Adolescent Mental Health Services (CAMHS) interventions and the provision of wheelchairs. They should ensure that the support that they provide to families while waiting is well used and beneficial.
- 3. The local area partnership should develop and embed its work with education settings on improving inclusion, so that the proportion of children and young people achieving strong outcomes increases.
- 4. The local area partnership should continue to work with relevant stakeholders to ensure that there is sufficient and suitable Alternative Provision and post-16 options for children and young people with SEND.







Response to ASEND Inspection findings

The East Sussex Partnership already has a <u>SEND Strategy</u>, the <u>SEND Strategy Governance Board</u> has oversight of the strategy and monitors how the identified priorities are being delivered. Three sub-groups support implementation of the strategy:

- The SEND Strategy Implementation Group meets monthly and monitors delivery of the implementation plans
- The SEND Commissioning and Monitoring Group meets every two months and oversees commissioning of provision and support for SEND children and young people across education, health and social care
- The Alternative Provision Sub-group meets every two months and oversees strategic planning and review of the range of AP in East Sussex.

In response to the inspection and in line with statutory guidance the partnership has updated the East Sussex SEND strategy with this Inspection Implementation Plan to address the areas for improvement. The Inspection Implementation Plan has been developed with partners through our existing governance structures, this has included parents/carers and young person feedback.

The current strategy has been extended for an additional year, to the end of the 2025/26 academic year to provide additional time to deliver improvement and to understand the policy direction of the new government on SEND. Work across the local area partnership will begin in 2026 on our next SEND strategy.







Theme 1: My voice is heard and acted upon (Participation)

Although this area of improvement is not a development specifically in relation to participation, it will be reported on under Theme 1 as children and young people and their families are central to the creation of initial EHC plans and the annual review process.

Area of Improvement (AfI) from the ASEND Inspection:

- AfI 1 The local area partnership should continue to improve the quality of EHC plans, so that there is consistent input across all agencies to better identify the provision that children and young people require to meet their needs. This should include:
 - · improving joint working of practitioners, particularly health, to contribute to EHC plans; and
 - ensuring a more timely and precise annual review process.

Strategic Leads: Strategic Lead SEND Assessment and Planning (ESCC), Principal Educational Psychologist (ESCC), Designated Clinical Officer (NHS)

| High Level Actions | Key Activity and lead | Target Dates | Evidence of Impact and success measures | Reference to other plans |
|---|---|--------------|--|--|
| 1.1 Improve the consistency of input into the EHCNA process (20-week advice) from Health practitioners. | Review the pathway from the LA to Health services to seek advice - Designated Clinical Officer and Strategic Lead SEND Assessment and Planning Develop a clear guidance document setting out how Health services will be identified and approached for advice by the LA - Designated Clinical Officer and Strategic Lead SEND Assessment and Planning Review and make improvements to the process of consideration of | April 2026 | Improved compliance in providing Health advice within prescribed timescales in statutory processes Reduction in delays to EHCNA timescales as a result of incomplete or inaccurate Health advice % of EHCP health contributions within 6 weeks | EHCP writing Best Practice document EHCP health focus through Pan Sussex Children's Board (SEND as one of four agreed priority areas) |







| | | • | Health advice inclusion in the EHC plan - Designated Clinical Officer and Strategic Lead SEND Assessment and Planning Timeliness of health advice has been highlighted in 2025/26 commissioning intentions to NHS providers. The ICB will be using the contracting route to seek assurance on delivery from providers. The outputs will be taken through the ICB governance i.e. commissioning group to ensure executive oversight. Joint Director for Children and Young People (NHS Sussex) | April 2026 | | |
|-----|--|---|--|------------|--|---|
| 1.2 | Improve the quality and accuracy of Health-related information in Sections C and G of EHCPs, and therapies advice and provision in Section B and F, with a focus on best practice expectations of the different sections (including specificity) | • | Continue to develop the work set out within the Invision action plan to improve the quality of wording in Section C and G - Designated Clinical Officer and Strategic Lead SEND Assessment and Planning Agree actions with Children's Integrated Therapy and Equipment Service (CITES) to improve the quality of information in statutory advice (and therefore provision in Section F) that aligns better with inclusive delivery in schools - Designated Clinical Officer and | | Invision audit data, reported through the QA Framework and Theme 1: Increase in the number of plans where Section C, F and G of EHCPs are graded as 'good' or better (in relation to Health needs and provision) Reduction in feedback from schools during EHCP consultation that Section F is not deliverable in an inclusive way | • |







| | | Strategic Lead SEND Assessment and Planning Identify and implement actions for EPS to improve the quality of information in statutory advice (and therefore provision in Section F) that aligns better with inclusive delivery in schools - Principal Educational Psychologist, and Strategic Lead SEND Assessment and Planning (and Designated Clinical Officer in relation to crossover areas of advice, e.g. communication needs) Quality of health advice has been highlighted in 2025/26 commissioning intentions to NHS providers. NHS Provider contracts to include EHCP data quality improvement plans, which will be tracked through provider assurance meetings. Joint Director for Children and Young People (NHS Sussex) | April 2026 April 2026 | (mainstream and special schools) |
|-----|--|--|--------------------------|---|
| 1.3 | Further develop the Invision cycle of audit and training for all sections of the EHCP (Continuing to improve the quality of EHC plans - focus on accurate, best practice | A minimum of 300 EHCPs are audited each year: In person Invision Audit day every 3 months (process audits a minimum of 60 plans) | | Invision audit data, reported Invision action plan through the QA Framework and Theme 1: • Continued improvements in the number of plans where individual EHCP |







| expectations of the different sections, including specificity) | Following each audit, training needs are identified for Assessment and Planning, and statutory partners, and these are taken forward through EHCP template changes, whole team training and individualised practitioner support. | As set out April 2026 | sections are graded as 'good' or better Continued improvements in the overall rating of EHCP plans being 'good' or better |
|--|--|-----------------------|--|
| | Strategic Lead SEND Assessment and Planning | | |
| Undertake deep dives of EHCPs that contain education, health and care provision every 6 months -following the ASEND Case Tracking audit model. | Continue to run regular EHCP Quality Assurance cycle, learning from the experience of previous audits, including those through the ASEND inspection - Strategic Lead SEND Assessment and Planning, and Designated Clinical Officer for Health and Designated Social Care Officer for Social Care | April 2026 | Improvements in the ratings of multiagency audits of plans Improvements in the quality of single-agency information provided as part of the audit process |
| | • Expand the number of senior staff involved in the audits to ensure that there is better understanding of the process across organisations. Senior Manager: Contracts and QA | July 2025 | |
| | Develop a process for sharing outcomes of Audits across Education, Health and Care | September 2025 | |







| 4.E. Castings the | services that identify key areas of learning. Senior Manager: Contracts and QA | Frank 1 | | CENID Asses |
|--|---|--------------------|--|---|
| 1.5 Continue the monitoring and response systems to maintaining improved annual review timescales for annual reviews | Weekly monitoring of the Annual Review inbox (Office Manager and Training and Development Consultant) Weekly monitoring and response checks: annual review paperwork sent to the LA within 2 weeks, statutory 4-week letter date met (Deputy Service Managers Assessment and Planning and Deputy Service managers, EHCPs Transitions) | From April 2025 | Continued improvements in 12-week statutory timescale data for Annual Reviews Reduction in complaints around Annual Review timeliness | SEND Assessment and Planning Team Plan |
| | Two-weekly email sent to all Assessment and Planning Officers and Team Leaders indicating current status of annual reviews and actions to be completed (Training and Development Consultant, Deputy Service Managers Assessment and Planning) Maintenance of the annual review tracker and escalation of concerns impacting timeliness (Assessment and Planning) | | | |

ASEND Inspection Improvement Plan



Education)





Annual reviews discussed in monthly supervision (Assessment and Planning) In addition, for annual reviews not held by the EHCP Transitions Advisers (all year groups except Year 4,5,6,9,10,11): • Themes impacting timeliness collated and responded to, e.g. paperwork not being returned on time by schools, schools not responding to chase contact, volume of annual reviews to process (Deputy Service Managers Assessment and Planning, Strategic Lead SEND Assessment and Planning, Senior Manager SEND Quality of







Theme 2: My optimum health and well-being are supported (physical and mental health)

Theme 2 focuses on ensuring all parts of our system work together to support the best health and wellbeing of every child and young person in our county, including reducing health inequalities.

Area of Improvement (AfI) from the ASEND Inspection:

Afl 2 - The local area partnership should take further action to reduce overall waiting times in relation to neurodevelopmental pathways, Child and Adolescent Mental Health Services (CAMHS) interventions and the provision of wheelchairs. They should ensure that the support that they provide to families while waiting is well used and beneficial.

Strategic Leads: Designated Medical Officer (NHS) and Strategic Lead Safeguarding and Emotional Wellbeing (ESCC)

| Hig | n Level Actions | Key Activity and lead | Target Dates | Evidence of Impact and success measures | Reference to other plans |
|-----|---|---|--|---|---|
| 2.1 | Improve waiting times for Neurodevelopmental pathways | Key activities across the Sussex All Age Neurodevelopmental Programme include: Designing clinical assessment pathways aligned with system planning opportunities Design and deliver a pilot to evaluate the use of the needs-led Dimensions tool in schools. Establishment of a Communications Task and Finish group across neurodevelopment and children's mental health Deliver the second year of the Partnerships for Neurodiversity in Schools (PINS) programme in 10 primary schools. Development of "Support whilst Waiting" information on East Sussex Local Offer and NHS Sussex ICB SEND page. | Dimensions Tool Pilot to commence in April 2025 March 2025 | The ND Programme will be overseen by the Sussex Mental Health, Learning Disability and Autism Delivery Board and reported to the Pan Sussex Children's Board. The main objective for the programme is to improve the experience and outcomes for local people with neurodevelopmental needs. Including: providing neuroinclusion in school settings, meeting people's needs irrespective of assessment and / or diagnosis, supporting people to have advice, | Children's Board quarterly highlight reports to capture health updates. |







| | | 1 Year expansion of Amaze Neurodevelopmental Navigation Service - additional investment will see an increase in no of families supported by 20% (approx. 120 per year). Measurable outcomes for the ND Programme are currently being developed. Leads: Interim Director Mental Health, Learning Disability and Autism Commissioning and Transformation / Deputy Head of Mental Health CYP Commissioning and Transformation (NHS Sussex), Senior Manager, Targeted Support Services (ESCC), Neurodevelopmental Pathway Lead, Sussex CAMHS (NHS Provider), Consultant in Paediatric Neurodisability (NHS Provider) | April 2025 September 2025 | guidance and signposting based on their needs and/or whilst waiting for assessment, streamlined pathway that better matches individual need to service offer with the aim of increasing capacity and improving access to assessment. An options appraisal to improve waiting times for assessment is scheduled to report in July 2025 and a baseline with metrics will then be confirmed | |
|-----|---------------------|--|---------------------------------------|---|---|
| 2.2 | CAMHS interventions | The CAMHS transformation is a two-year programme of change which will implement improvements in the delivery of community specialist CAMHS across Sussex. Key deliverables include: Development of a new CAMHS clinical model of care. This will be done in collaboration with children, young people and their families and key partners Completion of CAMHS capacity and demand modelling to inform workforce plans and service delivery. Agreed phased implementation plan for the new CAMHS clinical model from Q4 25/26. | September 2025 December 2025 | The Programme will be overseen by the Sussex Mental Health & LDA Board and reported to the Pan Sussex Children's Board. • The main objective of the programme is improved access to timely, consistent and evidence-based quality support designed to meet the needs of children and young people. This will result in improved outcomes and experience | Children's Board quarterly highlight reports to capture health updates. |







| | | Please note alongside the specialist CAMHS improvement programme, action is also being taken to strengthen access to information and advice, getting help services and also support when a young person is in mental health crisis. Key deliverables include: • Agreed standardised information and advice across services to support young people and families to access support, and whilst they wait for services (building on what is already available). • Implementation of a new intensive crisis support team for children and young people at risk of hospital admission. • Redesign and re-procurement of 'getting help' services (pre-specialist CAMHS support). Measurable outcomes for the overall CAMHS programme are currently under development. Leads: Head of Children and Young People's Mental Health Commissioning (NHS Sussex), Strategic Lead Safeguarding and Emotional Wellbeing (ESCC), Head of Service, Sussex Community CAMHS (SPFT) | September 2025 April 2025 June 2026 June 2025 | for children and young people. • As part of the planning process for 25/26 measurable outcomes are currently being developed and agreed and as draft metrics we will observe the potential for a reduction in % of referrals waiting for treatment waiting 4 months or less and a reduction in % of referrals waiting for assessment waiting 4 weeks or less. | |
|-----|--------------------------|--|---|--|---|
| 2.3 | Provision of Wheelchairs | A clinical harm review of the waiting times for wheelchairs was undertaken by the provider in December 2024 with support from the NHS Sussex Quality Team and Commissioners. The provider has implemented a number of mitigations to improve the quality and safety of provision. | The long-term solution is to recommission the service Sussex-wide by April 2027. It will take 2 years to procure and | Short term success measures Stabilise staff retention Consistent reduction in incidents, complaints and concerns from implementation of action plan back to stabilisation at business as usual | Children's Board quarterly highlight reports to capture health updates. |







| The long-term solution is to recommission the service Sussex-wide but this will not be in place until April 2027. Commissioners have worked closely with Senior Managers in ICB procurement to ensure we can move this work through as quickly possible. Clinical and Quality Teams are currently working with the provider on how best to mitigate the risks by supporting waiting list | mobilise any "new" provision. The current provider has agreed to continue to provide the service in East Sussex during the 2-year re- procurement. | Medium term success measures Reduction in the number of children and young people waiting over 18 weeks by 80% over the 6 months outlined in the provider's action plan. Long term success measure (following the re-procurement of service) Improvement in % receiving their wheelchair |
|--|--|---|
| reduction ahead of procurement. Timelines and trajectories to be worked up with clinical/quality teams and the provider and monitored through ICB contractual route. Update communications to families about wait times and support available whilst waiting. Leads: Senior Manager: Joint Commissioning and Joint Commissioning Manager with NHS Sussex Clinical and Quality Teams | May 2025 June 2025 | By recommissioning the service there is an expectation that waiting times will improve in line with other areas in Sussex. |







Theme 5: I am supported to develop and achieve mygoals (progress and achievement)

Theme 5 focusses on our ambition for young people with SEND to be supported in the best ways to help them achieve the best possible educational progress. This includes going onto achieving their goals as adults.

Areas of Improvement (AfI) from the ASEND Inspection:

AfI3 - The local area partnership should develop and embed its work with education settings on improving inclusion, so that the proportion of children and young people achieving strong outcomes increases.

AfI4 - The local area partnership should continue to work with relevant stakeholders to ensure that there is sufficient and suitable Alternative Provision and post-16 options for children and young people with SEND.

Strategic Leads: Strategic Lead Post-16 Education (ESCC) and Senior Manager SEND Quality of Education (ESCC)

| High Level Actions | Key Activity and lead | Target Dates | Evidence of Impact and success measures | Reference to other plans |
|---|---|---------------------------|---|--------------------------------|
| Review and revise the Universally Available Provision documentation to frame expectations on high quality Inclusive SEND provision. | Review existing East Sussex UAP and consideration of the format / content learning from other LAs and national best practice (including the SENDAP Change Programme) Devise new UAP in consultation with stakeholders including schools, ESCC services, parents/ carers, health through a stakeholder event in June 2025 Senior Manager, SEND Quality of Education, and Senior Manager SEND and AP Change Programme | From September 2025 | Improvements in the consistency of SEND provision across mainstream schools - reduction in inclusion concerns reported to the LA Reduction in suspensions and exclusions for CYP with SEND Improved attendance for children with SEND and EHCPs Improved parental confidence in mainstream provision to meet a wide range of SEND- reduction in inclusion concerns reported to ESPCF | PIP Priority 1 |







| 3.2 | Develop a self-assessment framework to align with the UAP and inform improvement activities | Work with schools to agree a process for self-assessment that supports school development activities in establishing high quality UAP. Agree a schedule for roll out. Agree process for how assessment data is used to target support and identify emerging training needs in schools Work with PCF to agree a methodology for parental engagement and support in the process. Senior Manager, SEND Quality of Education | | Increase in the number of schools undertaking self-assessments Improvements in outcomes for CYP with SEND | PIP Priority 1 |
|-----|---|---|---------------------------|--|-------------------|
| 3.3 | Develop and embed a common understanding of inclusion that can be used to promote a consistent culture that SEND is 'everyone's business' and there is a shared understanding of accountability including high quality teaching, high aspirations, understanding of pupil needs, adaptive teaching, reasonable adjustments and overall school culture including for attendance. | Build on the work of the EPS, in consultation with schools, to develop a common understanding of inclusion in mainstream schools. Develop and agree an accountability framework which sets out where responsibilities for different aspects of improvement lie across the school system. Review the offer of targeted SEND support to schools and families to ensure that it aligns with the accountability framework and that LA services have a joined up approach to supporting inclusion. Develop a peer-let system that uses data to identify schools which need additional support from other school leaders. Review the funding arrangement for small schools that promotes inclusive practice | From September 2025 | Reduction in suspension and PEX numbers for pupils with SEND Improved progress and attainment for pupils in English and Maths (grade 4 or higher) with SEND (particular focus on SEN Support pupils) Attendance for CYP with SEND to improve to be in line with national averages. Increase in the proportion of CYP with EHCPs who are placed in local mainstream schools. | PIP Priority 1 |







| 3.4 | Embed the vision for good attendance in East Sussex with schools through the Primary and Secondary Boards and linking with SEND Statement of Intent. | Senior Manager, SEND Quality of Education, and Senior Manager SEND and AP Change Programme, Principal Educational Psychologist and Senior Manager Targeted Support Services. • Attendance is part of discussions with schools from all services • Regular review of attendance data at board meeting with focus on: Persistent Absence, Severe Absence, SEND data. • Attendance Support Teams TSMs • Analysis with schools around SEND cohorts and key groups. • Conduct research on ways of overcoming specific barriers to improving attendance - at school or pupil level to inform practice in East Sussex. Strategic Lead Education Improvement | Ongoing from March 2025 | Improved attendance for pupils with SEND | PIP Priority 1 |
|-----|--|--|-------------------------------|---|-------------------|
| 3.5 | Further develop the training offer for schools and settings to build capacity and have sustainable impact around improving the knowledge, confidence and inclusive practice in education settings for children and young people with SEND. | Review current training offer from all services to avoid overlap and repetition Develop an audit tool to identify gaps in confidence and competence, in line with the UAP and compile workforce development priorities on the basis of this. Work with the Education Improvement Partnerships/allainces to target training on EHCNAs for | From September 2025 | Schools feel supported and equipped to manage pupils with complex SEND needs in mainstream settings - determined by a school survey Improved parental confidence in expertise in mainstream schools to meet SEND - reduction in inclusion concerns reported to ESPCF | PIP Priority 1 |







| | | EYFS staff in specific settings to support transition to school Work with providers to set up specialist nursery centres to become centres of excellence to provide training and support on SEND to settings Senior Manager, SEND Quality of Education, and Senior Manager Targeted Support Services. | | | |
|-----|---|---|-------------------|--|-------------------|
| 3.6 | Improved partnership between parents and carers and schools | Sharing of good practice where there are examples of effective parent / carer engagement through forums / SEND newsletters / 'champions' of SEND in individual schools etc Senior Manager, SEND Quality of Education and Strategic Lead Post-16 Education | September 2025 | Self-evaluation data returns around working with families indicate positive outcomes and improvements from the 2024/25 data return Increased number of schools have an effective, positive parent forum / steering group in place - indicated through self-evaluation | PIP Priority 1 |
| 3.7 | Pilot special school satellite class in mainstream schools | Identify special and mainstream schools willing to take part in the pilot Agree funding model Develop the delivery model and areas of accountability Head of Education SEND and Schools Safeguarding, Head of Education Participation and Planning | January 2026 | Reduction in the number of CYP deemed special appropriate, but without a special school placement Increase in the range of provision opportunities available for CYP with SEND | |







| 4.1 | Implement the updated DfE Statutory Guidance for AP | Develop and publish a strategic plan for AP Ensure there is clarity of roles and responsibilities for AP providers, schools and parents/carers in line with the guidance AP Sub-group reviewed annually and has a clear work programme for monitoring AP delivery and impact on pupil outcomes Head of Education Inclusion and Partnerships, Head of Education Participation and Planning | Summer 2025 | Improved re-integration rates, attendance and outcomes for pupils accessing AP | |
|-----|---|---|--|--|-------------------|
| 4.2 | Further develop the sufficiency and suitability of the AP offer | Continue working with the DfE to complete the transfer of College Central to LSEAT and secure suitable accommodation - Head of Education Inclusion and Partnerships, Head of Education Participation and Planning Lead the further development of the AP Directory and develop new provision where gaps are identified - Commissioning Manager Work with all providers to ensure a clear focus on re-integration of pupils from AP back into their home school Strategic Lead Inclusion and AP Deliver the multi-agency AP Taskforce as part of the CPP to improve support for pupils - Senior Manager, SEND and AP Change Programme | Summer 2025 Ongoing Summer 2026 Ongoing from spring 2025 | AP places available Increase in quality of LA commissioned AP Improved re-integration rates, attendance and outcomes for pupils accessing AP | PIP Priority 2 |







| 4.3 | Review and develop post 16 and post 19 options for young people with SEND and/or those who are NEET to improve their choices and opportunities to access further education, employment and independence | As part of the CPP Pan-Sussex work review the current offer and forecast the provision required in future years. Work in partnership with FE colleges and providers to address the identified gaps in provision | June 2025 Ongoing from March 2025 | Increase the number of young people with SEND who progress successfully onto post 16 destinations Reduction in NEET - young people with SEND | PIP Priority 1 Pan Sussex Post 16 SEND Strategic Work Plan |
|-----|---|--|-----------------------------------|---|---|
| | (Improve pan Sussex partnership work and planning) | Explore different models of post 16 provision for young people with SEND who are not yet ready to progress onto a mainstream post 16 setting including specialist facility provision | January 2026 | | |
| | | Work in partnership with the East Sussex Parent Carer Forum and young people with SEND to understand their experience of transition into post 16 destinations and identify changes to practice that can improve transition | September 2025 | | |
| | | Working with our PMLD special schools and Adult Social Care to review provision and plan the delivery of new provision that supports progression to adulthood. | January 2026 | | |
| | | Strategic Lead Post-16 Education and Service Manager Post-16 and INMS | | | |







| 4.4 | Research best practice in post 16 education and preparation for adulthood pathways to further drive improvements in post 16 mainstream FE providers | Visit outstanding FE providers, at least one of the Association of Colleges SEND Centres for Excellence Identify opportunities for CPD with and between organisations as well as sharing best practice and lessons learned Work in partnership with post 16 settings and Adult Social Care to develop provision that supports pathways and transition into ASC services and/or independent/supported living Work in partnership with Supported Employment providers and employers to create pathways into sustainable employment | Complete by July 2025 | people with SEND who progress successfully onto post 16 destinations Reduction in NEET - young people with SEND | PIP Priority 1 Pan Sussex Post 16 SEND Strategic Work Plan |
|-----|---|---|--------------------------|--|---|
| | | Strategic Lead Post-16 Education and Service Manager Post-16 and INMS | | | |

For information and updates about the SEND Strategy, please visit our Local Offer:

• East Sussex SEND Strategy | East Sussex Local Offer

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