Shropshire SEND Accelerated Progress Plan
12 Month Review May 2024

Name of the local area	Shropshire
Date of inspection	21–23 November 2022 (Special Educational Needs and Disability (SEND) Revisit)
Date of publication of the revisit report	06 February 2023
Date of 12 month update report	22 May 2024
Accountable officers from the LA and CCG	David Shaw (LANO) – Shropshire County Council Tanya Miles – Exec Director of People Shropshire County Council Gareth Robinson, Director of Delivery and Transformation and Executive Lead for SEND, Shropshire Telford and Wrekin / Vanessa Whatley, Interim Chief Nursing Officer and Executive Lead for SEND from 1st June 2024 Jennifer Griffin – Designated Clinical Officer for SEND, NHS Shropshire, Telford and Wrekin
DfE and NHSE advisers	POC Katie Pritchard (DfE) and Debbie Ward (NHSE)

Current context in relation to the Accelerated Progress Plan

Shropshire Local Area has committed to addressing the Accelerated Progress Plan through a range of initiatives, largely led through multi-agency workstreams. Governance around the APP has continued to drive strong oversight of progress with actions, monitoring of impact and has provided leverage to assist challenges impacting on progress. Following the completion of the original APP actions, the Local Area Partnership have reflected on progress made to date, what actions are now required to embed the progress made and continue the improvement journey to maximise the positive impact on enhancing the experience for children, young people and their families.

Progress continues to be made in a number of areas, particularly in relation to the provision of information, supporting the early years and school age workforce through new outreach teams, supporting children and families awaiting ND diagnosis whilst they wait, embedding our effective multi-agency working around EHCPs, including implementing the EHCP Quality Assurance Framework and continuing to promote the support available whilst children wait to see a Speech and Language Therapist. Notably additional funding has been committed to increase the capacity of the 0 – 5 and 5 – 18 ASD and ADHD diagnostic services, this increased funding envelope will result in the capacity of the services matching the current demand for assessments based on monthly referral rates. Additionally, it should be noted that the Speech, Language and Communication workstream has received national recognition from NHS England for strong joint working across education and health enabling the roll out of Talk Boost and other initiatives.

The Local Area has continued to experience challenges, in line with the national trend, with regards to sustained high numbers of requests for EHC Needs Assessments, referrals to ASD and ADHD diagnostic services and the national shortage of Speech and Language Therapists. The Local Area has identified several key drivers in relation to these challenges, particularly around the strength of the Graduated Response to identify and meet need at SEND Support leading to inconsistency in numbers of requests from some settings and high parental requests. The Shropshire Ordinarily Available Provision (SOAP) framework has been co-produced with education settings, PACC and SENDIASS, to ensure consistent clear expectations of what should be provided for all children and young people through high quality teaching and SEND Support, across the four broad areas of SEND. Additional recruitment to three Education Quality Advisor (SEND and AP) roles covering the Early Years, School age and Post 16 phases is underway to ensure a strong approach to implement, embed and evaluate SOAP, whilst building confidence of families.

These challenges continue to impact the experience of children, young people and families, most acutely on the timeliness of issuing new EHC plans following assessment and the mental health of CYP whilst waiting for ND diagnostic services. The Local Area Partnership are aware of these challenges and the active development, implementation and evaluation of the recovery plans. A similar approach is being adopted in relation to Annual Reviews and ensuring the same robust high quality and timeliness of amendments are applied. We continue to note the languishing impact of Covid is continuing to affect CYP within our community, this is particularly evident when thinking about CYP's emotional wellbeing and mental health.

To support the actions within the APP, training and support has continued to be secured from a range of sources. This has included direct support for education settings through a new outreach offer from a special school Trust, continued development of training and practice offers from Educational Psychologists,

Early Help practitioners, the Virtual School and most recently the direct commissioning of the SEND Peer Review pilot delivered through the national organisation Challenge Partners. Training has also been provided by the Education Access Service and GP Safeguarding Lead to the GP network, to promote strong attendance for all children and young people, including where they are presenting with emotional wellbeing and mental health difficulties.

Co-production, Communication and Engagements

Following the 6 month review meeting in October 2023 a formal update was co-produced with PACC (Parent Carer Forum) and SENDIASS (Information Advice and Support Service) and associated partnership workstreams, to ensure the progress in delivering the APP was shared publicly. The update is available online; 6 Month Review of the Accelerated Progress Plan | Shropshire Council.

In addition to the overall 6-month review update, the analysis of the summer 2023 baseline survey was also published in a 'You said, we did, next steps' format. The update is available in the link; Parent Carer Survey Report February 2024.

We have continued to embed the core group of communication leads from the ICB, LA, Parent Carer Forum and SENDIASS to act as a central point to agree communication methods for important news stories to share with the community. Additionally, workstreams have agenda items dedicated to good news stories and challenges which need to be shared with the community. This has continued to enable the SEND Newsletter to act as a regular key communication tool, informed by an overall communications work plan that is reviewed and updated monthly by the core communications group.

Work continues to improve our communication approach and utilise a broader range of communication channels, including regular updates on the Local Offer website and social media channels News | Shropshire Council
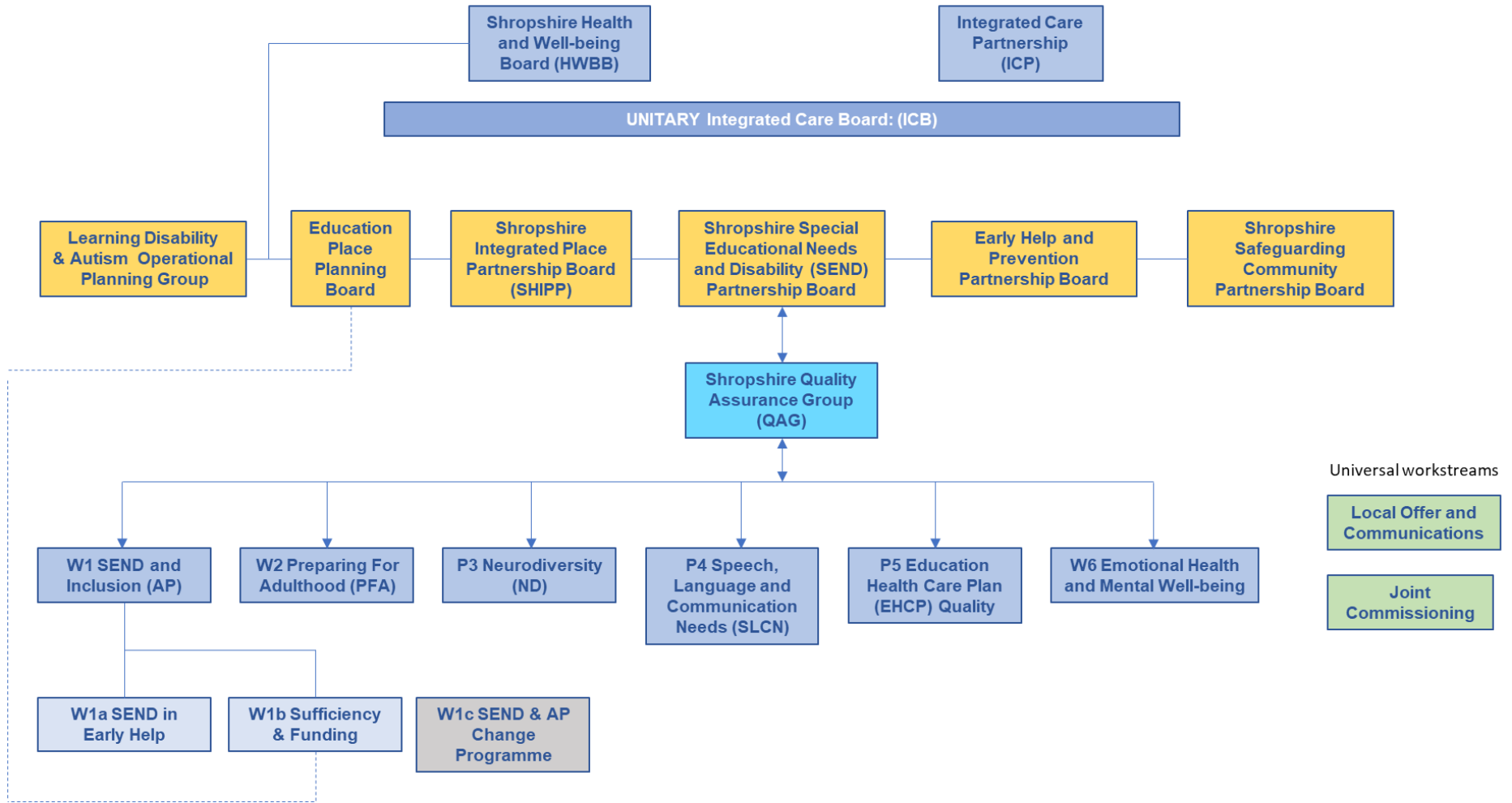
Parent Carer Co-production has continued to be integral to all activity related to the Accelerated Progress Plan (APP). Parent Carer representatives continue to be part of all workstreams associated with the APP. Considerable co-production with PACC, and joint working across partnership systems has been done to develop the 'updated proposed actions for June 2024'. This work has taken place within the ND, SLCN and EHCP workstream and has involved joint agreement regarding new priority areas to support CYP and their families, joint prioritisation regarding completion dates acknowledging that not all actions can be completed simultaneously and agreement regarding membership of proposed task and finish groups.
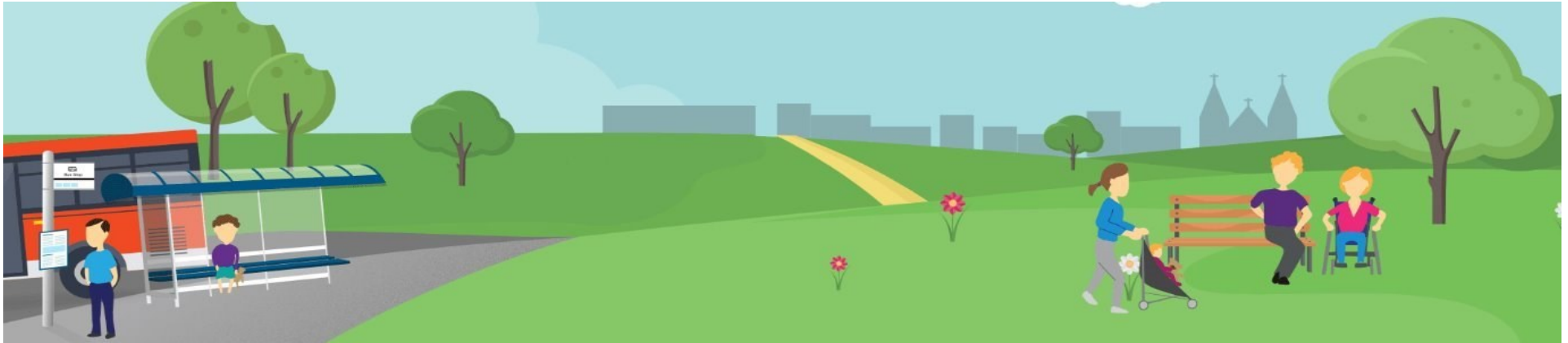
We remain committed to further developing and embedding effective co-production, ensuring that the Local Area Partnership has strong methods of gathering views of all children, young people and families in innovative ways, including our most seldom heard groups. This work is being progressed through the development of the new SEND and AP Strategy and Outcomes Framework, including a range of qualitative and quantitative outcomes to identify what good looks like from the perspective of children and young people, families and partners, plus exploration into technology solutions to gather views from

these key groups. We will outline our shared approach to delivering these approaches through the development of a communication, co-production and engagement strategy by September 24.

We have also acted upon a key priority to further develop our range of engagement and co-production activities with children, young people and families through a variety of face-to-face events, such as Early Help drop-in sessions across the County, direct engagement from our Youth Teams with young people in their settings, development of the Virtual School School Council and the development of a Young Persons Forum, commencing in June 24, to promote strategic and operational co-production around employment. Whilst we are encouraged by the increase in direct engagement to bring a wider range of voices from children, young people and families into the strategic, operational and individual decision making across the Local Area Partnership, we are committed to extending this further and embedding more consistent and regular opportunities for these activities as part of our usual approaches.

Governance and Accountability Structures and Processes

Shropshire Health and Well-being Board (HWBB)

Integrated Care Partnership (ICP)

UNITARY Integrated Care Board: (ICB)

Learning Disability & Autism Operational Planning Group	**Education Place Planning Board**	**Shropshire Integrated Place Partnership Board (SHIPP)**	**Shropshire Special Educational Needs and Disability (SEND) Partnership Board**	**Early Help and Prevention Partnership Board**	**Shropshire Safeguarding Community Partnership Board**

Shropshire Quality Assurance Group (QAG)

Universal workstreams

Local Offer and Communications

Joint Commissioning

W1 SEND and Inclusion (AP)	**W2 Preparing For Adulthood (PFA)**	**P3 Neurodiversity (ND)**	**P4 Speech, Language and Communication Needs (SLCN)**	**P5 Education Health Care Plan (EHCP) Quality**	**W6 Emotional Health and Mental Well-being**

W1a SEND in Early Help	**W1b Sufficiency & Funding**	**W1c SEND & AP Change Programme**

Priority Area 3: Significant wait times for large numbers of children and young people on the autism spectrum disorder (ASD) and attention deficit hyperactivity disorder (ADHD) diagnostic pathways.

RAG: **R:** Delayed or Low confidence of completion;
A: Completion delayed or at risk but being managed;
G: Completion on track and will be met;
C: Completed;

Area of weakness identified in the original inspection

Priority Area 3: Significant wait times for large numbers of children and young people on the autism spectrum disorder (ASD) and attention deficit hyperactivity disorder (ADHD) diagnostic pathways.

Overarching Aspiration: The needs of CYP related to ASD & ADHD are effectively identified at early stages and there is high quality support both pre, during and post diagnosis

Actions designed to lead to improvement

Theme of Actions	Completed Actions to October 2023	6 Month update October 2023	Original date	RAG
3.1 Actions to ensure clarity about the support available	3.1.1 Collate details of all support currently available for those with (or possibly with) ASD & ADHD age 0 - 5	All support available for Neurodivergent Children and their families are listed here	May 23	
	3.1.2 Collate details of all support currently available for those with (or possibly with) ASD & ADHD age 5 - 18	Local Support National Support Regular communication is shared regarding support available for those with ND. Recently updates have been shared in the following places - SEND Local Offer Newstletter - LA Education Updates - Early Years communications	Jul 23	
	3.1.4 Have a specific ASD area on local offer website (as requested through the Local Offer working group	The ND Workstream made the decision to have a Neurodiversity area on the Local Offer which links through to the resources developed on the Healthier Together website	Jun 23	
	3.1.5 Publish all the support available on the local offer website		Sep 23	

	3.1.6 Promote the support on offer via SEND newsletter, local offer website, healthier together website, PACC newsletters, Special Educational Needs Coordinator (SENCo) and Head Teacher networks	Activity has taken place to promote the support available, most recently through the Shropshire SEND newsletter We note promotion and communication is an ongoing requirement	Sep 23	
3.2 Actions to ensure good quality support for Early Years and Educational Settings	3.2.1 Gather & analyse feedback from early years & educational settings regarding neurodiversity and how to support identified needs	Feedback has been gathered & analysed from early years & educational settings regarding neurodiversity and how to support identified needs, this has informed future training plans	May 23	
3.3 Actions to ensure good quality support for parents and carers	3.3.1 Continue the Autism West Midlands offer of support which does not require a diagnosis to access	Autism West Midlands contract has been extended for 2 years until 31/03/2025. We recognise and celebrate that there has been an increased uptake of the Autism West Midlands summer programme in 2023.	Apr 23	
	3.3.2 Develop and launch the Child Development Centre CDC advice line which will be accessible to children for whom there are concerns, and help in navigating the system and what's available	The Child Development Centre advice line is live following a soft launch. The advice line is accessible to those known to CDC and those within a 6-month period following discharge.	Jun 23	
	3.3.3 Roll out of the Healthier together website with advice and guidance for the ND population	As detailed above pages relevant to the neurodivergent CYP population and their families have been developed on the Healthier Together website. Clinical oversight of these pages is in place if further adaptations are required. We note promotion of this resource is ongoing.	Apr 23	

Theme of Actions	Incomplete Action	6 Month update May 2024	Original date	Proposed date	RAG
3.1 Actions to ensure clarity about the support available	3.1.3 Collate details of all support currently available for those with (or possibly with) ASD & ADHD age 18+	The information has been collated but needs to be adapted into a different format. Graduate Psychologists are completing this task. Settings in Shropshire have been approached to hold focus groups for YP and a feedback questionnaire has been developed. YP are reviewing the infographic to ensure that it is accessible and useful before it is published.	Sep 23	August 24	
3.2 Actions to ensure good quality support for Early Years and Educational Settings	3.2.2 The multiagency ND Training Steering Group will co-produce a plan to meet the identified needs of schools and settings including training and coaching to enable early identification and support for needs related to ASD and ADHD	This action has been completed for ASD; action will be amended to address ADHD in partnership with Telford & Wrekin colleagues.	Jul 23	June 24	
	3.2.3 Review and develop the outreach support available to early years & education settings to ensure that CYP's needs are identified early and supported well	3 new education quality advisors for SEND & AP Workforce are being recruited imminently. These posts will support from early years to post 16. Fortnightly surgeries are offered from the Early Years SEN team to support settings.	Sep 23	Aug 24	
	3.2.4 Early years settings to complete a self-evaluation of their inclusivity and their approach to admittance – in each locality there will be one setting who has done the SEN review and is engaged in supporting other settings in their locality	20+ PVI early years settings have completed the NASEN SEND Review and subsequently developed an action plan for their setting.	40% of settings by end of Jan 24		

| | 3.2.5 Education settings to complete a self-evaluation of their inclusivity and their approach to enabling pupils to remain in mainstream education and thrive– in each locality there will be a professional learning network to collaborate and share practice (peer review programme) | To further progress this action Shropshire LA are recruiting to 3 x Education Quality Adviser (SEND & AP) covering the Early Years, School age and Post 16 phases. Interviews for these roles are imminent to view to colleagues starting in post in September 2024 | 40% of settings by end of Jan 24 | Aug 25 | |

Priority Area 3: Significant wait times for large numbers of children and young people on the ASD and ADHD diagnostic pathways.

Overarching Aspiration: CYP who require a diagnostic assessment, easily access a high-quality diagnostic assessment in a timely way

Actions designed to lead to improvement

Theme of Actions	Completed Actions November 2023 to April 2024	6 Month update April 2024	Original date	RAG
3.5 Actions to ensure referrers know how to make good referrals which are accepted	3.5.3 Clear criteria and referral route for current ASD & ADHD diagnostic pathway in place	Information regarding the ASD referral route has been detailed on the Healthier Together website – Autism Assessments The equivalent information will shortly be uploaded to the relevant ADHD page on the Healthier Together website. BeeU have recently updated their referral process, including new referral forms which can be found in the 'getting more help' section of the BeeU website	Dec 23	
3.7 Actions to avoid CYP going into crisis whilst waiting for diagnosis by implementing robust approaches to manage risk	3.7.4 Further promotion of how families and CYP can contact the service if their situation changes so their prioritisation can be reconsidered (currently stated in letter)	The Child Development Centre has launched an advice line which can be contacted by those waiting. The BeeU service have recruited to 2 assistant psychologists with the specific remit to support families whilst they are waiting for assessment. These practitioners have proactively contacted those families waiting the longest for assessment and have also met with roughly 50 attendees at coffee mornings and events, one of the aims of these sessions has been to encourage that contact is made with BeeU if a CYP's needs have changed whilst they are waiting.	Sep 23	
	3.7.5 Enhance the risk management approach through additional funding from the Learning Disability and Autism LDA program			
3.8 Actions to ensure capacity of the diagnostic service meets the	3.8.4 Develop, fund and recruit to short term recovery plans	In the financial year 2023 – 2024 short term recovery funding was committed to procuring additional diagnostic services for the 5 – 18 BeeU service. This has been delivered through Healios. The SCHT 0 – 5 CDC service have	Dec 23	

demands of the population		also procured some additional diagnostic assessments through AXIA. As referenced previously, long term funding has been agreed to ensure diagnostic assessment capacity meets the current demand for assessments.		
	3.8.5 Understand the capacity of the services currently	The ICB commissioner has led on work to understand the current capacity and demand of these services. Work has been done with children's services to provide additional funding to 'right size' the services based on the current and recent level of demand.	Dec 23	
	3.8.6 Develop a trajectory of future growth and capacity required to meet the needs	A funding request to increase funding into the BeeU and SCHT ASD / ADHD diagnostic services has been successful. This will result in a doubling of the workforce completing ASD / ADHD assessments and support. The impact of this is expected to be that by March 25, those waiting for an ASD assessment only wait 24 weeks and those waiting for an ADHD assessment only wait 18 weeks. SCHT are in the process of developing this trajectory regarding the impact that additional funding will have on waiting times.	Jan 24	
	3.8.7 Develop a business case to fund the increased demands across the age range	A funding request to increase funding into the BeeU and SCHT ASD / ADHD diagnostic services has been successful. SCHT are in the process of developing this trajectory regarding the impact that additional funding will have on waiting times.	Jan 24	
	3.8.8 Services are reviewing their skill mix to mitigate the impact of challenges with recruitment and retention, in the context of increased demand.	Considerable work has been done to review the skill mix with SCHT CDC with successful recruitment to Lead Specialist Nursery Nurse posts. BeeU have reviewed their skill mix during the process of developing their waiting list trajectory for 24 – 25.	April 24	

Theme of Actions	Action not completed	6 Month update May 2024	Original date	Proposed date	RAG
3.4 Actions to enable trial of enhanced support	3.4.2 Review the impact of the ND Practitioners to inform the requirements for support in the 2nd year	This action is on track. Evaluation criteria is included in the Service Delivery Plan. A parent carer and pupil friendly survey have been developed to support this evaluation.	Apr 24	Oct 24	
3.5 Actions to ensure referrers know how to make good referrals which are accepted	3.5.4 Clear criteria and referral route for current ASD & ADHD pathway published on the local offer	Information regarding the ASD referral route has been detailed on the Healthier Together website – Autism Assessments The equivalent information will shortly be uploaded to the relevant ADHD page on the Healthier Together website. BeeU have recently updated their referral process, including new referral forms which can be found in the 'getting more help' section of the BeeU website	Jul 23	July 24	
3.7 Actions to avoid CYP going into crisis whilst waiting for diagnosis by implementing robust approaches to manage risk	3.7.6 Complete an audit of cases waiting over 6 months to assess the impact of waiting and review the effectiveness of approaches to manage risk. Share the learning from audits with the SEND Partnership Board and Learning Disability and Autism Board	An audit of cases waiting within the BeeU service was completed in 2023. As an outcome of the audit, it was agreed that a re-audit would be completed in May 2024 which is underway. Audits for those waiting in the SCHT CDC have been delayed due to challenges with recruitment of administrative staff.	Jul 23	Sept 24	

Priority Area 3: Significant wait times for large numbers of children and young people on the Autism Spectrum Disorder (ASD) and Attention Deficit Hyperactivity Disorder (ADHD) diagnostic pathways.

Priority Area 3: Proposed updated actions from June 2024

The needs of CYP related to ASD & ADHD are effectively identified at early stages and there is high quality support both pre, during and post diagnosis

Overarching Aspiration: The needs of CYP related to ASD & ADHD are effectively identified at early stages and there is high quality support both pre, during and post diagnosis

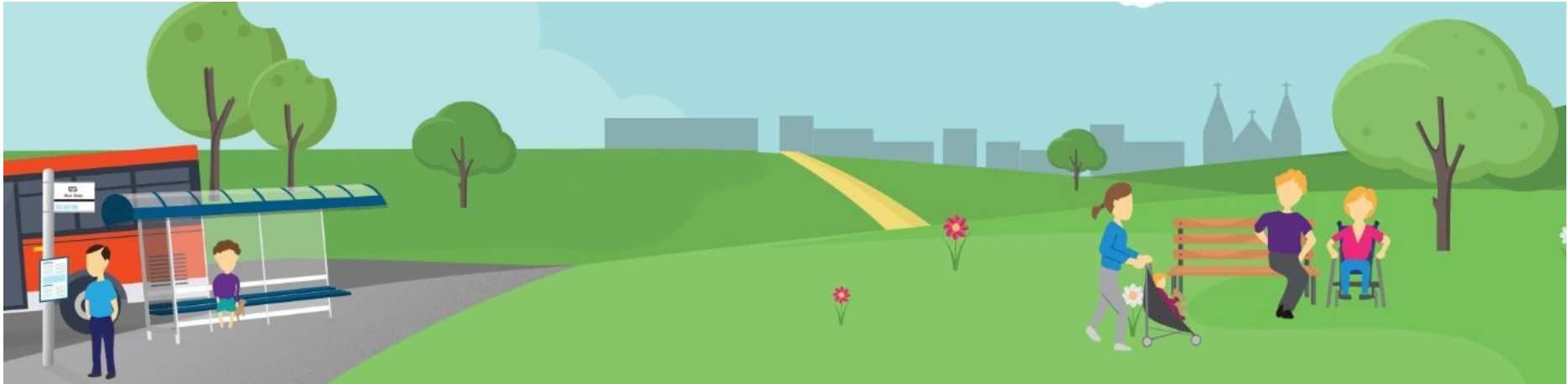| 3.1 Actions to ensure clarity about the support available			
3.1.7	Collate details of all support currently available for those with (or possibly with) ASD & ADHD age 18+	Aug 24	Existing action
3.1.8	Develop a plan to improve CYP co-production with the ND workstream, such as - clear pathways for CYP to contribute to the ND workstream - a CYP version of the parent carer newsletter - awareness raising videos using the young person's voice about neurodiversity and what good support looks like	May 24	New action
3.1.9	Complete 6 monthly reviews of the healthier together resources for parent carers	Aug 24	New action
3.1.10	Task and finish group to agree on terminology and language for consistency, and to evaluated whether this is consistent across	Aug 24	New action
3.1.11	Accessible information easy reads for the DSR / CETR and accessible videos for DSR / CETR / Key working	Jun 24	New action
3.1.12	BeeU to publish expected waiting times for ASD and ADHD on the BeeU website.	Sept 24	New Action
3.2 Actions to ensure good quality support for Early Years and Educational Settings			

3.2.6	The multiagency ND Training Steering Group will co-produce a plan to meet the identified needs of schools and settings including training and coaching to enable early identification and support for needs related to ADHD	Jun 24	New Action
3.2.7	Develop a resource which details support available for schools and settings link with SOAP document and associated toolkit	Sept 24	New Action
3.2.3	Review the outreach support available to early years & education settings to ensure that CYP's needs are identified early and supported well. Work with partners to address identified gaps.	Apr 25	New Action
3.2.4	Early years settings to complete a self-evaluation of their inclusivity and their approach to admittance – in each locality there will be one setting who has done the SEN review and is engaged in supporting other settings in their locality	Apr 25	New Action
3.2.5	Education settings to complete a self-evaluation of their inclusivity and their approach to enabling pupils to remain in mainstream education and thrive– in each locality there will be a professional learning network to collaborate and share practice (peer review programme)	Aug 25	Existing action
3.3 Actions to ensure good quality support for parents and carers			
3.3.4	Establish a task and finish group to support workforce development of the social care workforce	Dec 24	New action
3.4 Actions to enable trial of enhanced support			
3.4.2	Review the impact of the ND Practitioners to inform the requirements for support in the 2nd year	Oct 24	Existing action

Overarching aspiration: CYP who require a diagnostic assessment, easily access a high-quality diagnostic assessment in a timely way

3.5 Actions to ensure referrers know how to make good referrals which are accepted			
3.5.4	Clear criteria and referral route for current ASD & ADHD pathway published on the local offer	July 24	Existing action
3.5.6	New referral paperwork needs to be shared with referrers - including information session for SENCos and GPs	Jul 24	New action
3.6 Actions to ensure communication from 5 – 18 diagnostic service is clear – all actions completed			

3.7 Actions to avoid CYP going into crisis whilst waiting for diagnosis by implementing robust approaches to manage risk				
3.7.6	Complete an audit of cases waiting over 6 months to assess the impact of waiting and review the effectiveness of approaches to manage risk. Share the learning from audits with the SEND Partnership Board and Learning Disability and Autism Board	Sept 24	Existing action
3.8 Actions to ensure capacity of the diagnostic service meets the demands of the population				
3.8.11	Based on new funding SCHT CDC to develop a trajectory of recovery to reduce waiting times	Jun 24	New action
3.8.12	Continue to routinely monitor waiting times & staffing levels through contract review meetings	Ongoing	New action
3.8.13	Work alongside national and regional team to develop plans to meet the increasing demand of ASD and ADHD assessments for those over 18	Ongoing	New action

Priority Area 4: Significant waiting times for those needing assessment and treatment from the speech and language therapy service.

Priority Area 4: Significant waiting times for those needing assessment and treatment from the speech and language therapy service.

Overarching Aspiration: Speech language and communication needs of children are effectively identified at early stages and there is high quality support at universal and targeted levels to reduce the number of children who require more specialist support

Actions designed to lead to improvement

Theme of Actions	Completed Actions to October 2023	6 Month update October 2023	Original date	RAG
4.1 Actions to ensure clarity about the support available	4.1.1 Collate details of all support currently available from Public Health for those with SLCN including from the Best Start to Life programme	The mapping of Public Health support for those with SLCN has been completed. Close working is taking place in relation to the Best Start for Life initiatives with SLTs involved and influencing the programme of work.	May 23	
	4.1.3 Map the full offer of current SLT support – SLT Handbook	The SLT Handbook for parent carers and partners has been developed to support understanding of the clinical offer from the SLT service. Additionally certain clinical pathways have been mapped against the iThrive model.	Apr 23	
	4.1.8 Continue the multiagency SLCN workstream to enable the continuation of support for SLCN being delivered by all	The SLCN workstream has continued with strong multiagency attendance which has driven many of the system wide improvements.	Apr 23	
4.2 Actions to ensure good quality support for Early Years and Educational Settings	4.2.1 Education to promote the use of SLC UK data tracking to support the implementation of Talk Boost	Usage of the SLC UK data tracking has increased across the area and is reviewed at SLCN workstream meetings. We note promotion of this tool is ongoing.	Jun 23	
	4.2.3 Evaluation of the impact of Talk Boost, including the impact on the early identification and support of SLCN. This evaluation to be reported to the SLCN workstream, Quality & Assurance Group and SEND Partnership Board.	Evaluation has been gathered through the SLC UK Talk Boost tracker which indicates there has been a closing of the language gap for 65% of children for whom baseline, and subsequent performance was reported.	Jul 23	

		There are some signs of reduction in referral rates to SLT services.		
	4.2.7 Continue to deliver Early Years, KS1 and KS2 of Talk Boost training to ensure sustainability	The delivery of Talk Boost training has been ongoing, plans are in place for future training to the education workforce.	Apr 23	
4.3 Actions to ensure good quality support for parents and carers	4.3.3 Publicise the commitment to SLCN being everyone's responsibility and that everyone has a role to play in supporting SLCN	There is an acknowledgement across the system that all parties have a role to play in supporting children and young people's speech, language and communication needs. This has resulted in some slowing of referral rates to the SLT service.	Apr 23	
	4.3.4 Maintain the SLT service advice line	The SLT advice line has been maintained, and SLT staffing has been allocated to this element of the service moving forward.	Jul 23	

Theme of Actions	Completed Actions November 2023 to April 2024	6 Month update April 2024	Original date	RAG
4.1 Actions to ensure clarity about the support available	4.1.6 Promote the support on offer via SEND newsletter, local offer website, SCHT NHS (National Health Service) SLT website, PACC newsletters, SENCo and Head Teacher networks	Regular communication is shared regarding support available for those with SLCN. Recently updates have been shared in the following places - SEND Local Offer Newstletter - Schools Inclusive Forum Day - SCHT SLT Facebook Page - LA Education Updates - Early Years communications	Aug 23 / Nov 23	
4.2 Actions to ensure good quality support for Early Years and Educational Settings	4.2.4 Planned Inclusion sessions for early years and educational settings including SLCN	Sessions have been held with both the schools and early years workforce, feedback from these sessions has been positive with comments such as "useful to hear about routes to support" and "good links to research with lots of thinking about how to adapt the curriculum offer to meet needs"	Apr 23 / Dec 23	

	4.2.8 Videoing SLT training offer to make it more accessible to support early identification and addressing CYP's needs	The SCHT SLT service have recorded a number of training packages, some of which are available online. The online videos have had roughly 200 views since they were put up in February. Education settings and parents have commented that having the videos available to access at any time has been beneficial. *"The course was done via You Tube so could be accessed at a convenient time to the school and could be done in more than one session if needed. It allowed other staff to access it too, which was really useful."*	Sep 23 / Jan 24	
4.3 Actions to ensure good quality support for parents and carers	4.3.2 Videoing SLT training offer to make it more accessible		Sep 23 / Jan 24	

Theme of Actions	Incomplete Actions	6 Month update May 2024	Original date	Proposed date	RAG
4.1 Actions to ensure clarity about the support available	4.1.2 Collate details of all support currently available from Early Years Settings for those with SLCN	Much of the mapping work has been done, however additional workforce capacity has been committed to finalise and publish the mapping work. This publication will be similar to that completed for the ND workstream.	May 23	Sept 24	
	4.1.4 Collate details of all other support currently available for SLCN (excluding Speech and Language Therapy SLT)		Jul 23	Aug 24	
	4.1.5 Publish all the support available on the local offer website		Aug 23	Oct 24	
	4.1.7 Have a specific SLCN area on local offer website (as requested through the Local Offer working group)	This area will be developed following the publication of the full range of support available. This page will be similar to the Neurodiversity page on the local offer website.	Aug 23	Oct 24	
4.2 Actions to ensure good quality	4.2.2 All settings to utilise the SLC UK data reporting on Talk Boost	Although there has been an increase in settings using the SLC UK data reporting tools for Talk Boost this has not been wide scale. Some settings have developed alternative practices to capture data	Sep 23	Jan 24	

support for Early Years and Educational Settings		which is effective on an individual level but does not contribute to the overall picture of impact. This action will be supported through the role out of the ELSEC programme.			🟩
	4.2.5 Review and develop the outreach support available to early years & education settings to identify needs early and provide good quality support, including best practice SLCN Teaching (SLCN Primary Talk and Early Talk ICAN)	There is the continual roll out of Talk Boost, including Early Years Talk Boost. Further training has been rolled out has been delivered to cover staff turnover. Additionally in some settings Early Years Talk Boost has been delivered to primary schools where appropriate for a cohort of children. Fortnightly surgeries are offered from the Early Years SEN team to support settings. 3 new Education Quality Advisors (SEND & AP) workforce are being recruited imminently. These posts will support from early years to post 16.	Sep 23	Aug 24	🟧
	4.2.6 Pilot the roll out of Talk Boost Year 7	This action has not been taken forward due to delays in the national roll out of KS3 Talk Boost.	Sept 23	NA	🟩
	4.2.9 SLT relaunching traded services offer for ELKLAN	Work is underway to enhance the availability of traded services from SLT. Progress with this is impacted on by national SLT workforce shortages.	Sep 23	Dec 24	🟩
4.3 Actions to ensure good quality support for parents and carers	4.3.1 Enhance the peer support offer for families regarding SLCN, adopting a SLCN champions model`	Joint work is taking place with PACC (parent carer forum) to explore the current offer of support for families with children and young people with SLCN. This has included work to identify how to engage with families who specifically want support around SLCN. Additionally, through the development of the ELSEC programme actions are being co-produced to address this area.	Apr 24	Dec 24	🟩

Priority Area 4: Significant waiting times for those needing assessment and treatment from the speech and language therapy service.

Overarching Aspiration: CYP who require Speech and Language Therapy support can access this in a timely way

Actions designed to lead to improvement

Theme of Actions	Completed Actions to October 2023	6 Month update October 2023	Original date	RAG
4.4 Actions to ensure the capacity of the SLT service meets the demands of the population	4.4.1 Complete triage upon referral and implement specialist clinical pathways to ensure CYP who have the greatest clinical need for specialist SLT are seen most quickly	The process of triaging CYP and expediting referrals based on clinical needs has enabled CYP requiring specialist clinical pathways to be seen more quickly.	Apr 23	
	4.4.5 Commissioner to understand current waiting times from referral to treatment	Information regarding waiting times is reported to the ICB and reported to the SEND partnership board.	Jun 23	
	4.4.7 Understand the capacity of the services currently	The SLT service have provided details of the capacity within the service with the ICB.	Jun 23	
4.5 Actions to monitor and escalate long waits to ICS	4.5.1 Clear data reporting of waiting list from providers with oversight from performance & assurance manager	SLT data reports are now consistently split to separately reflect Shropshire and Telford & Wrekin children and young people.	Jun 23	
	4.5.2 Ensure the quality team have assurance in place around harm review and risk process	The ICB quality team have an oversight of processes in place to mitigate risk and identify any harm. The SLT service have embarked on an audit process to review potential harm for those waiting over 6 months.	Jun 23	
	4.5.3 Dependant on level of harm as ascertained by harm review and risk process, ensure the potential risks of long waits are noted on the ICB risk registers	The ICB quality team review the risk register through the System Quality Group. SLT waits are not currently held on the System Quality Group risk register.	Jul 23	

Theme of Actions	Completed Actions November 2023 to April 2024	6 Month update April 2024	Original date	RAG
4.4 Actions to ensure the capacity of the SLT service meets the demands of the population	4.4.3 Complete analysis of current commissioning arrangements across, LA, schools and Health to meet need	These actions have been completed jointly by ICB and LA commissioners, as well as SEN leads across the system. Further to this, commissioners have completed analysis of need to identify areas which require additional intervention. To plan for the ELSEC project schools were rated as priority based on analysis of needs as evident in the Early Years Foundation Stage Outcomes, SLCN prevalence within a school at SEN and EHCP level and deprivation indicators.	May 23 / Nov 23	
	4.4.4 Commissioners to understand current spend, both block contract and individual commissioning and school spend to enable benchmarking		May 23 / Nov 23 / Dec 23	
	4.4.6 Develop, fund and recruit to short term recovery plans		Jun 23 / Nov 23	
	4.4.8 Develop a trajectory of future growth and capacity required to meet the needs including early indicators of the impact of Talk Boost on referral rates		Jun 23 / Nov 23	
	4.4.9 Develop a business case to fund the increased demands across the age range		Jun 23 / Dec 23	

Theme of Actions	Incomplete Actions	6 Month update May 2024	Original date	Proposed date	RAG
4.4 Actions to ensure the capacity of the SLT service meets the demands of	4.4.2 Complete an audit of cases waiting over 6 months to assess the impact of waiting and review the effectiveness of triage. Share the learning from audits with the SEND Partnership Board and CYP and Families System Board	The audit of harm process has been piloted on 10 children using harm proformas. The process was piloted to identify the effectiveness of the process. Following this a full audit of harm is underway.	Jul 23	Oct 24	
	4.4.10 Review the SLT service specification and ensure that it meets the needs of the population	Review of the proposed service specification is underway by the ICB commissioner. LA commissioners	Sep 23	Aug 24	

| the population | whilst being supported by a context of SLCN being supported by all | are additionally reviewing any gaps in service and developing a proposal to mitigate these gaps. | | | |

Priority Area 4: Significant waiting times for those needing assessment and treatment from the speech and language therapy service.

Priority Area 4: Proposed new actions from June 2024

Speech language and communication needs of children are effectively identified at early stages and there is high quality support at universal and targeted levels to reduce the number of children who require more specialist support

4.1 Actions to ensure clarity about the support available			
4.1.5	Publish all the support available on the local offer website	Oct-24	Existing Action
4.1.7	Have a specific SLCN area on local offer website (as requested through the Local Offer working group)	Oct-24	Existing Action
4.1.9	Collate details of support currently available from Early Years Settings and schools for those with SLCN to be linked with the EYS SOAP and SLCN tool kit	Sep-24	New Action
4.1.10	Collate details of all other support currently available for SLCN (excluding Speech and Language Therapy SLT and support delivered by schools / EYS (as covered in action above)	Aug-24	New Action
4.1.11	Develop an annual communications schedule for the SLCN workstream	Sept 24	New Action
4.2 Actions to ensure good quality support for Early Years and Educational Settings			
4.2.2	All settings to utilise the SLC UK data reporting on Talk Boost	Dec-24	Existing Action
4.2.5	Review and develop the outreach support available to early years & education settings to identify needs early and provide good quality support, including best practice SLCN Teaching (SLCN Primary Talk and Early Talk ICAN)	Mar-25	Existing Action
4.2.10	Establish the Speech Language UK 'Talk For Work' offer from LSAT service for KS3 and 4 settings for 24/25	Dec 24	New Action
4.2.11	Explore further SLCN training requirements with education settings across LA and SLT supported by the ELSEC project	Jan-25	New Action
4.2.12	SLT service to engage with education settings to develop a dynamic needs led whole setting support offer supported by the link therapist model	Mar-25	New Action
4.2.13	To develop and deliver system wide resources and processes to capture the voice of children and young people with SLCN supported by the ELSEC offer	Jul-25	New Action

4.3 Actions to ensure good quality support for parents and carers				
4.3.1	Enhance the peer support offer for families regarding SLCN, adopting a SLCN champions model`	Jan-25	Existing Action
4.4 Actions to ensure the capacity of the SLT service meets the demands of the population				
4.4.2	Complete an audit of cases waiting over 6 months to assess the impact of waiting and review the effectiveness of triage. Share the learning from audits with the SEND Partnership Board and CYP and Families System Board	Oct 24	Existing Action
4.4.10	Review the SLT service specification and ensure that it meets the needs of the population whilst being supported by a context of SLCN being supported by all	Aug 24	Existing Action
4.4.11	Analyse trends of referral rates to understand impact of Talk Boost, ELSEC and Link Therapist	Dec-24	New Action
4.4.12	Based on potential additional funding from LA, LA to identify a set of priorities for additional SLT input and proposal regarding these	Jun-24	New Action
4.4.13	SCHT to respond to proposal from LA, response to include feasibility of proposal and clarity about whether SCHT have ability to take forward this additional service level agreement	Aug-24	New Action
4.4.14	Continue to routinely monitor waiting times & staffing levels through contract review meetings	Ongoing	New Action
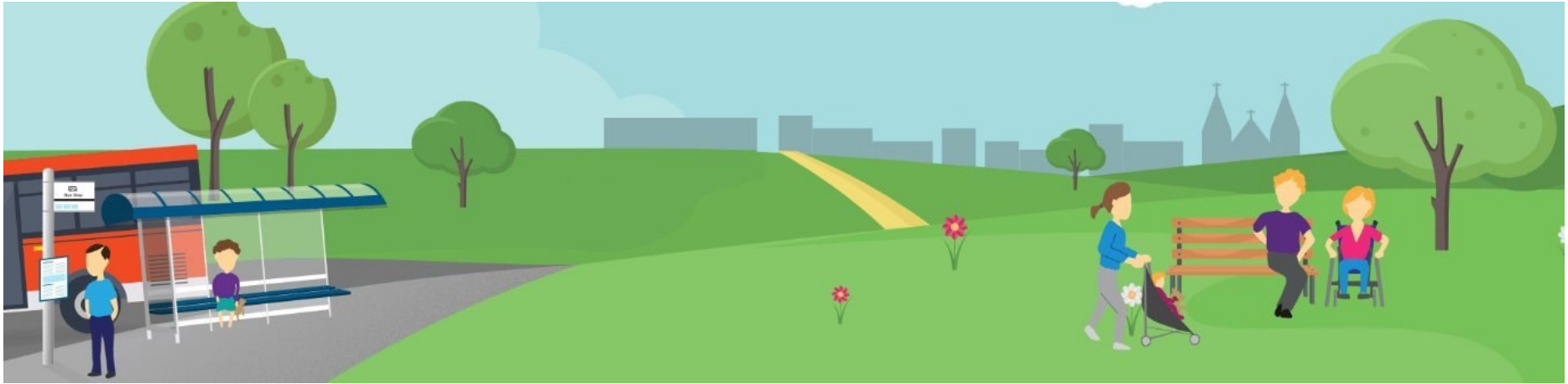
Priority Area 5: Inconsistency in the quality of input from education, health and care into EHC assessment and planning
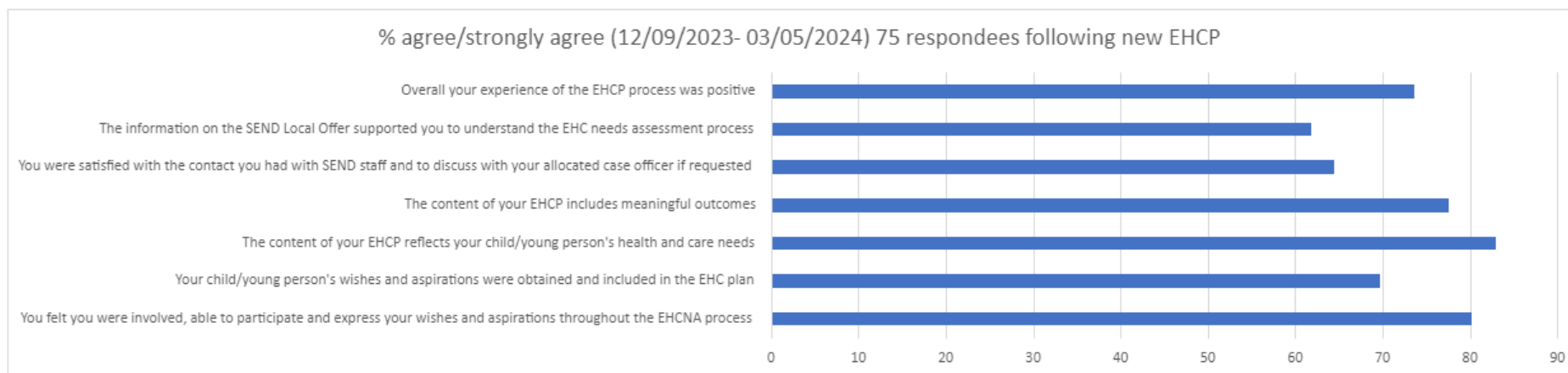
Priority Area 5: Inconsistency in the quality of input from education, health and care into EHC assessment and planning

Overarching Aspiration: Improve consistency and quality of EHCP's supported by good assessment and planning process

We have developed a quality assurance framework for both statutory advice and EHCPs. This has been peer moderated by colleagues from Telford and Wrekin. A summary of QA activity gives an outline of QA activity. Findings from all QA activity feed into regular staff training and this has contributed to quality of EHCPs good and above at 92%, well above the expectation for April 2024 of 66%.

Workforce development programme is in place and work is progressing, including training programmes in place for advice writing. By the end of January 2024 65.5% of the Early Help practitioners had undertaken training.

The second survey of parent experience in April 2024 (151 responses) showed percentage satisfaction over all areas falling below expectations for April 2024, around 46%, down from 50% in October. The regular feedback from parent/carers for new EHC plans issued since September 23, that is routinely collected, showed higher levels of overall satisfaction of 74%.

% agree/strongly agree (12/09/2023- 03/05/2024) 75 respondees following new EHCP

Actions designed to lead to improvement

Theme of Actions	Completed Actions to October 2023	6 Month update October 2023	Original date	RAG
5.1 Actions to ensure the quality of new EHC Plans is improved	5.1.6 Review arrangements for provision of advice from health teams less frequently involved in EHCNAs e.g. Epilepsy team, wheelchair services	Training has been delivered to epilepsy teams, wheelchair services, and Bernardo's keyworkers on EHCPs. Support for the diabetes team has been via the Children's Community Nurse with support from DCO. Processes now in place for DCO to offer support for requests that are made of those who don't regularly provide advice.	Sep 23	
	5.1.7 Develop and deliver a revised induction and EHC plan writing training programme for Special Education Needs and/or Disability Case Officers	Draft Plan Writing IPSEA and CDC training programme completed by 8 case officers. Refreshed 3 weekly internally. All new staff to receive IPSEA training on a rolling programme. Feedback from QA process used to develop case officer plan writing skills	May 23	
	5.1.8 Develop a performance monitoring system to provide reporting and Power BI dashboard data to monitor 20-week timescale for issuing finalised plans	A performance monitoring system is in place. Weekly meetings with Assistant Director and Head of Service with SEN Team to discuss 20-week performance. Performance data is sent monthly to DfE and reviewed in meeting with DfE SEN adviser. Data captured and reported to SEND Partnership Board half termly. Monthly performance is circulated to all SEND staff. Power BI dashboard is in production.	Jun 23	
	5.1.12 Reinstate SEND Health Operational Group to address quality of EHCP advice and improve consistency	This group has been re-established with membership from SCHT and MPFT. This group has met regularly.	Apr 23	
5.2 Actions to ensure an effective quality assurance process.	5.2.5 Recruit Associate DCO for SEND to increase capacity to support EHCP quality within health	The Associate DCO started in May 23 and regularly attends SEN panels, contributes to the QA process as well as providing advice and support to plan writers, and advice contributors.	Jun 23	

5.3 Actions to ensure all current EHC Plans are updated and amended to meet new quality standards and issued within statutory timescales	5.3.1 Develop and implement an annual review recovery plan and develop business case to ensure sufficient capacity to amend all Plans issued prior to August 2023 to ensure they meet the new quality standards	Plan and business case have been developed. We have appointed an additional senior case officer and two further case officers. 99 EHCPs have been reviewed and completed so far this term.	Sep 23	
	5.3.3 Review Special Education Needs and/or Disability Team operating model with a specific focus on capacity to update Education Health Care Plans following amendments agreed via annual review	Planned as part of sufficiency moving forward	Apr 24	

Theme of Actions	Completed Actions November 2023 to April 2024	12 Month update April 2024	Original date	RAG
5.1 Actions to ensure the quality of new EHC Plans is improved	5.1.1 Improve the pre- EHCNA pathway to ensure that the requests received from settings contain person-centred information and focus on holistic outcomes which relate to the child's/ young person's aspirations to allow appropriate planning for the EHC assessment, where agreed, to be carried out	Task and finish group was established with SENDCO representation. EHCNA request, Annual Review and Appendix B paperwork has been reviewed and substantially redesigned and signed off in Feb 2024. Was launched to SENDCOs in network meeting and is currently in use and being evaluated.	Sep 23 / Nov 23	
	5.1.2 Co-produce new statutory advice templates for education, educational psychology, health, and care and review the process for obtaining the CYP voice ("all about me") and parent/carer views	Revised Appendix E shared with workstream and agreed. Social care, EP and Health have all shared their latest versions presented at QAG on 20 December and now in use and being evaluated.	Sep 23 / Nov 23	
	5.1.4 Review arrangements to ensure an assessment of social care need is completed for	The Social Care questionnaire is now available on the Local Offer, forming part of the suite of EHCP forms. It is	Sep 23 / Nov 23	

	each EHCNA and, where a child is not known to statutory social care services, ensure that advice and information relating to care needs and provision is requested from other professionals who know our families and CYP well so that the early help offer is embedded as part of the Education Health Care process	designed to identify the care needs, including Social Care, of children and young people (CYP) at the time an EHCNA request is made. Each completed questionnaire is triaged by Early Help/Social Care in a weekly meeting scheduled with the DSCO and EH SEND Operational Lead, or another member of the T.E.H/E-HAST team in their absence. Parent carers are either directed to community support services or offered a comprehensive Early Help Assessment for the entire family.		
	5.1.11 Develop a recruitment / retention strategy to ensure sufficient capacity within the Educational Psychology Service	Recruitment has taken place for 2 additional psychologist, 1 main grade (started Sep 23), 1 specialist senior (Started Jan 24). Significant investment made in securing locum, associate and agency capacity to address increasing demand in statutory work.	Sep-23	
	5.1.13 Review the Special Education Needs and/or Disability Team structure and develop a recruitment / retention strategy to ensure sufficient capacity to complete all statutory tasks	Streamlined the internal structure/process to be able to amend and QA plans. Structure within the team for weekly supervision of case officers to support workload and wellbeing.	Sep 23	
5.2 Actions to ensure an effective quality assurance process.	5.2.1 Publish Education Health Care Plan quality standards and coproduce a Quality Assurance Framework to agree the "Shropshire standard" of what a good quality plan looks like.	Quality standards were developed to agree what a good plan looks like.	Jul 23	
	5.2.2 Establish and embed a multi-disciplinary quality assurance process to monitor and improve the quality of new and amended Education Health Care Plans	Quality standards have been developed and signed off. These standards have been put into practice for routine and multiagency QA activity resulting in a marked improvement in EHCP quality	Jul 23	
	5.2.3 Develop and implement quality standards for statutory advice, including education, education psychology, health and social care and roll out a workforce training programme for practitioners	Quality standards have been completed. Ongoing training for those submitting advice will be addressed by proposed new actions.	Sep 23	

	5.2.4 Undertake monthly multi-disciplinary audits to ensure improved consistency of Education Health Care Plans	Regular termly multi-disciplinary audits take place and learning fed back into multi-agency training.	Sep 23	
	5.2.6 Engage in external peer review process for monitoring the quality of EHCP's	The Assistant Director has undertaken LGA peer review training. We have further external QA review planned with the DfE SEND Advisor	Sep 23	
5.3 Actions to ensure all current EHC Plans are updated and amended to meet new quality standards and issued within statutory timescales	5.3.2 Create a suite of co-produced new annual review templates and guidance, including key phase transition and preparation for adulthood templates	Annual review templates and guidance produced and signed off in February and are now in use. New, more focused actions will take this forward to develop resources for PfA and Phase Transfer	Sep 23	
	5.3.6 Review and update the local processes for annual reviews and publish an updated pathway on the local offer	Processes for annual reviews are undertaking a major review currently and new actions have been proposed. Information on the Local Offer has been reviewed and updated and checked. Guidance for practitioners to be reviewed and updated	Sep 23	

Theme of Actions	Incomplete Actions	6 Month update October 2023	Original date	Current date	
5.1 Actions to ensure the quality of new EHC Plans is improved	5.1.3 Develop a rolling multi-agency joint workforce training programme for all practitioners completing statutory EHC advice utilising the Council for Disabled Children's training resources	Task & finish group in December 2023 pinpointed remaining training needs. SEN Team have a rolling programme of training that is needs led with a minimum half termly refresh. Last one on 4 March. Next refresh in May on annual reviews. Education settings: 11 Apr booked session with Marches Academy Trust SENCOs re EHC Assessment requests and annual reviews. Plan to roll this out to academy trusts on rolling programme. SENCOs	Apr 23	Dec 23	

		now attend panel on a rolling programme for CPD purposes. This action will be split to better track very different multiagency workforce training programmes.			
	5.1.5 Review commissioning arrangements and update health service specifications to ensure health advice is provided where a CYP has a clinical requirement for input rather than being based on referral status	As the BeeU service specifications and contract has recently been updated there have been amendments to reflect SEND requirements. Discussions are underway with SCHT therapies services to ensure service specifications reflect SEND requirements. Further amendments to contracts or service specifications will be in line with agreed contractual timeframes.	Sep 23	Dec 24	
	5.1.9 Improve the quality and timeliness of statutory social care advice for EHCNAs and Annual Reviews	DSCO continues to track all requests for advice and offer consultations to those workers providing the advice. Reminders are sent to practitioners at the four-week stage. Early Help SEND Operational Lead operates the same system in Early Help. SEN Team provide a weekly report detailing advice due so that DSCO and EH SEND Operational Lead can make further attempts to follow up outstanding advice. All advice goes through a quality assurance process carried out by the DSCO and EH SEND Operational Lead, in-line with the SEND QA Framework. A dip sample of social care advice is audited on a quarterly basis by the DSCO and feedback from audits is provided individually to practitioners via their supervision and thematic feedback is provided to the social care workforce. Findings from QA and audit are then used to inform the Social Care SEND and EHCP training and staff SEND	Sep 23	Jan 24	

		induction, both of which are offered on a monthly rolling programme.			■
	5.1.10 Improve the quality and timeliness of statutory Health advice for EHCNAs and Annual Reviews	Timeliness of health advice has varied over the past 12 months. At present the timeliness of advice provided by SCHT is regularly delayed from the community paediatrics service. Advice from BeeU is provided in a more timely way. Recent benchmarking across West Midlands has indicated that timeliness of advice in Shropshire is on a par with many other local areas. Quality of advice from SCHT continues to be generally good, quality of advice from BeeU requires more support. Over the past 12 months we have seen an increase in advice from secondary and tertiary health services.	Sep 23		■
	5.1.14 Strengthen coproduction of EHCPs at an individual level by exploring and procuring an on-line digital Education Health Care system to enable families, professionals, and education settings to engage, contribute and collaborate on EHC assessments, plans and reviews	Working with Telford & Wrekin and Herefordshire, our change Programme partners to identify how we can effectively join resources to leverage best functionality from our existing Synergy system using their new case management module. Also exploring API functionality to streamline data flow between systems. This process is expected to take a further 12 to 18 months to complete.	Apr 24	Apr 25	■
5.3 Actions to ensure all current EHC Plans are updated and amended to meet new quality	5.3.4 Develop a performance monitoring system to provide reporting and Power BI dashboard data to monitor timescale for issuing finalised plans following annual review	Annual review Power BI dashboard is nearing completion. Some data cleansing and updating was required to conduct final tests and ensure the Power BI functionality meets the needs of the range of users that will need to access the information. A focused review and cleanse of data is currently underway. Further work is being undertaken in short to medium term on the SEN Portal to automate Annual Reviews into LA systems to enhance efficiencies in processing.	Sep 23		■

standards and issued within statutory timescales	5.3.5 Create a multi-agency (including Education Settings) training plan to ensure all staff are aware, understand and implement the local annual review processes	The annual review strand within the workforce training programme is underway with monthly team updates. A full review of annual review processes is being undertaken to streamline and enhance administration and further training will take place as required to ensure all staff are implementing new robust and efficient annual review processes.	Sep 23	Dec 23	

Priority Area 5: Improve consistency and quality of EHCP's supported by good assessment and planning process

Priority Area 5: Proposed new actions from June 2024

5.1 Actions to ensure the quality of new EHC Plans is improved			
5.1.5	Review commissioning arrangements and update health service specifications to ensure health advice is provided where a CYP has a clinical requirement for input rather than being based on referral status	Sep 23 / Dec 23 / Sep 24	Existing Action
5.1.14	Strengthen coproduction of EHCPs at an individual level by exploring and procuring an on-line digital Education Health Care system to enable families, professionals, and education settings to engage, contribute and collaborate on EHC assessments, plans and reviews	May 25	Existing Action
5.1.15	Improve quality with a focus specificity of outcomes and provision	Dec 24	New Action
5.1.16	Improve timeliness of statutory Health advice for EHCNAs and Annual Reviews	Sep 24	New Action
5.1.17	Develop a rolling Education workforce training programme for all practitioners completing statutory EHC advice utilising the Council for Disabled Children's training resources. Ensure all practitioners have good understanding of their role and how it fits with other agencies. Build upon existing training/support document for advice writers as a live document and develop into self-help training materials.	Sep 24	New Action
5.1.18	Develop a rolling social care workforce training programme for all practitioners completing statutory EHC advice utilising the Council for Disabled Children's training resources. Ensure all practitioners have good understanding of their role and how it fits with other agencies. Build upon existing training/support document for advice writers as a live document and turn into training materials.	Sep 24	New Action
5.1.19	Continue to deliver and promote rolling health training programme covering EHCP advice and annual reviews, ensuring an appropriate level of uptake from health	Sep 24	New Action

5.1.20	Develop a rolling Educational Psychology workforce training programme for all practitioners completing statutory EHC advice utilising the Council for Disabled Children's training resources. Ensure all practitioners have good understanding of their role and how it fits with other agencies. Build upon existing training/support document for advice writers as a live document and possibly turn into training materials.	Dec 24	New Action
5.1.21	Improve the quality of statutory social care advice for EHCNAs	Dec 24	New Action
5.1.22	Ensure that all EHC needs assessments are completed within the statutory 20 weeks by improving internal process.	Dec 24	New Action
5.2 Actions to ensure an effective quality assurance process.			
5.2.7	New EHC Needs assessment paperwork for schools will show an improvement in quality by [RAG] rating quality of information in paperwork by how easy it is to make a decision from schools and advice.	Aug 24	New Action
5.2.8	Investigate how effective are new Appendix B templates? How have they impacted upon quality? Capture effectiveness by [RAG] rating quality of information in paperwork by how easy it is to make a decision	Aug 24	New Action
5.2.9	Include multidisciplinary QA on amended plans	Nov 24	New Action
5.3 Actions to ensure all current EHC Plans are updated and amended to meet new quality standards and issued within statutory timescales			
5.3.4	Develop a performance monitoring system to provide reporting and Power BI dashboard data to monitor timescale for issuing finalised plans following annual review	Sep 23	Existing Action
5.3.7	Complete an audit of the quality of health advice, to include a sample of amended plans as well as stand-alone advice	Dec 24	New Action
5.3.8	Ensure that social care, early help, EP, Health and other partners receive timely notification of upcoming annual reviews	Dec 24	New Action
5.3.9	Ensure that all annual reviews processes are completed within the statutory 12 months by improving internal process.	Dec 24	New Action
5.3.10	Improve the quality of statutory social care advice for Annual Reviews	Dec 24	New Action

5.3.11	Create a suite of co-produced new annual review guidance for key phase transition and preparation for adulthood	Dec 24	New Action