



**Integrated
Care System**
Shropshire, Telford and Wrekin

Shropshire SEND Accelerated Progress Plan Parent Carer Survey Report May 2024

About the survey

“We want all Shropshire children and young people with SEND to be healthy, happy and safe, and able to achieve their potential to lead a fulfilling life.

We want them to have, and to expect, the same opportunities in life as other children and young people.

We want them to thrive and live their best life.”

- In April 2024, the Shropshire SEND Area Partnership launched a survey to understand the experiences of parent carers who have neurodiverse children and young people (CYP), parent carers of children & young people with Speech Language and Communication Needs (SLCN) and parent carers of children & young people with an Education, Health Care Plan (EHCP) or going through the Education Health Care (EHC) assessment process.
- The intention of the survey was to gather people’s experiences to measure the impact of the actions being taken as part of the Special Educational Needs and Disabilities (SEND) Accelerated Progress Plan, against the baseline survey in October 2023
- There were 219 responses to the survey, which ran from April to May 2024. The survey asked about parent carers recent experiences.
- 171 responders were from parents/carers of children & young people who required support related to neurodiversity, including Autism Spectrum Disorder (ASD) and Attention Deficit Hyperactivity Disorder (ADHD).
- 75 responders were from parents/carers of children & young people who required support related to Speech, Language and Communication Needs (SLCN).
- 151 responders were from parents/carers of children & young people with an EHCP or were undergoing an EHC needs assessment.
- As part of the survey parent carers were invited to add comments about their experience over the past 6 months. We received 130 written responses to this question, with a wide variety of comments. These responses have been categories into themes.



Section 1
**Neurodiverse Children
and Young People**

Responses relating to Neurodiverse Children and Young People (CYP)

Of **171** responders we heard that a high number of parent carers and their children & young people had received support from:

- Autism West Midlands (**65**),
- Midlands Partnership University NHS Foundation Trust's (MPUFT)
- BeeU Service (**86**)
- Educational Psychology (**42**)
- Early Years setting or School (**45**)
- Early Help (**43**)
- SENDIASS (**44**)

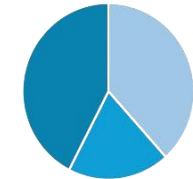
Responders were less aware of whether their children & young people had received support from:

- Early Bird Team (**4**)
- Kooth (**9**)
- Neurodiversity Practitioners (**4**)
- Preparation for Adulthood Navigators (**2**)
- Rising to the challenge (**3**)
- SCHAT Therapies (**6**)
- Social Care (**9**)

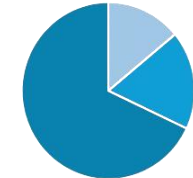
Responses relating to Neurodiverse Children and Young People (CYP)



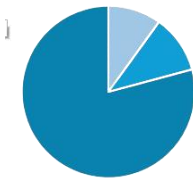
Question: **I think that I have a good understanding of the support available for my child or young person**



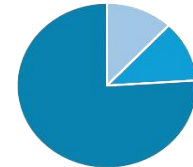
Question: **My child or young person has been able to access the support available to them**



Question: **My child or young person received the support that they needed**



Question: **Over the past 6 months, whilst my child or young person was waiting for a diagnostic appointment for ASD or ADHD, the support we received has helped**



Ensure clarity about the support available

You said

- A number of responses referred to a lack of support whilst waiting, with some comments that schools are the only support available. Comments included a dissatisfaction that there was only online support available, and some commentary that their child didn't meet the criteria for support. Some responses indicated that the available support is not easily accessible and this being particularly the case for those being home educated. There was a sense that whilst waiting for a diagnosis families were passed from pillar to post. There were comments about the lack of provision in the Ludlow area specifically.
- There was also specific commentary about a lack of support for sensory processing needs, a lack of respite / short breaks and an absence of focus on neurodivergences other than ASD and ADHD.

We did

- The Neurodiversity workstream has collated information about support available for neurodivergent children, young people and their families. This can be found on the Healthier Together website. The Child Development Centre (CDC) have an advice line which can be contacted whilst children are waiting for assessment. The BeeU service have employed 2 assistant psychologists to offer support to families whilst a child is waiting for a ASD / ADHD assessment – these staff members are offering support through coffee mornings and sessions for parents. A resource has been developed by SCHAT Occupational Therapy Service which is an introduction to sensory processing needs which gives information and advice about sensory processing needs.

Next steps

- Further links to be made with the home education team to ensure they can signpost to the support available. BeeU assistant psychologists are exploring how they can be more accessible in person across the geography of Shropshire. Over the next 12 months the neurodiversity workstream is broadening to consider needs related to Foetal Alcohol Spectrum Disorder and Tics and Tourettes and support for sensory processing needs. The Child Development Centre will shortly publish a flow diagram which clarifies what to expect during the assessment process, this has been supported by co-production with parent carers. We increase awareness and consistent accessibility of the Short Breaks offer and ensure that these opportunities are targeted at children and young people with different levels of need across different parts of Shropshire, particularly for those with the most complex needs.

Ensure good quality support for early years and educational settings

You said

- There was a range of feedback about schools, with some responses highlighting the value of the support provided by schools and others indicating that schools should do significantly more to provide support. A number of responses indicated that children had been withdrawn from schools by their parents due to a view that schools could not meet the needs of the child. There were also reports from parents that schools had delayed putting in referrals for ASD diagnostic assessments. Some comments indicated that schools weren't implementing the advice they were given, however there were some examples of schools implementing advice such as from Keystone Outreach or the neurodiversity practitioners.

We did

- Shropshire Local Authority have employed 3 Neurodiversity practitioners who are supporting roughly 50 schools in Shropshire, the neurodiversity practitioners also support children directly and their families. We have also secured additional funding through the Partnership of Inclusion for Neurodiversity (PINS) programme to provide further support for neurodivergent children & young people in schools.

Next steps

- The PINS project will continue beyond its initial stages in summer term 24, and academic year 24/25. Further to this, a plan is in development to provide further training support for schools to meet the needs of children & young people with or who may have ADHD.

Ensure good quality support for parents and carers

You said

- Parents spoke positively about support from Empathy for special children, Autism West Midlands, PACC, Oswestry SEN Parents and SENDIASS, although there was a reference to some of these services (particularly SENDIASS) being over stretched. Some parents commented that the only support available was training courses or leaflets. A number of parents reported that they had sought further necessary support from BeeU through the BeeU Patient Advice and Liaison Service.

We did

- Through the posts described above and the advice lines covered by clinical staff there has been an increase in the accessibility to speak to a professional about children's needs, feedback from families supported by Neurodiversity Practitioners indicates that this new resource supports families to be listened to and supported, this is similarly the case for support from Autism West Midlands. We recognise that this does not deliver a full coverage of support, however we encourage families to utilise these available resources. Through the PINS project additional funding has been devolved to PACC to provide support to families involved in the project through their child's school.

Next steps

- Ongoing training and development of the Social Care Practitioners to help them to support parent carers of children and young people with neurodiversity, as effectively as possible.

Ensure referrers know how to make good referrals which are accepted

You said

- Responses stated that they had been refused an assessment with further comments including referrers saying that it wasn't their place to make a referral, and another comment saying it was difficult to access the correct referral pathway. Some responses indicated that because their children & young people were high functioning or masking in schools, referrals weren't being made or accepted. A number of responses indicated that they wanted their children & young people to be assessed for ASD / ADHD but instead end up being on a waiting list for mental health support.

We did

- BeeU have made changes to their referral forms to differentiate between referrals to ASD and ADHD diagnostic services and a referral into their mental health services, it is anticipated that this will clarify the process and ensure that referrers, families and children & young people are clear about which service they are being referred to. These referral forms were launched in Spring 24. The Child Development Centre website has been redesigned in co-production with parent carers to detail helpful information about the diagnostic pathway.

Next steps

- BeeU are in the process of communicating these changes to schools, whilst reiterating advice to schools about how to make a good referral.

Ensure communication from 5 – 18 diagnostic service is clear

You said

- Parents commented that there had been a lack of communication from BeeU. One parent commented that the waiting well advice shared in February 2024 did not include the full range of services available to offer support.

We did

- Correspondences shared by the BeeU service to those of a waiting list for ASD / ADHD diagnostic assessment continue to be reviewed. Partners are committed to consistently signposting to resources such as the Healthier Together website. The additional posts of assistant psychologists within BeeU have enabled further capacity to make contact with families whilst waiting for a diagnostic assessment.

Next steps

- Continue to improve and collate details of all support currently available for those with (or possibly with) ASD & ADHD. Materials to be added to the Healthier Together website / the SEND Local Offer for those aged age 18+

Avoid children & young people going into crisis whilst waiting for diagnosis by implementing robust approaches to manage risk

You said

- Some parents raised concerns about their child's mental health whilst they waited for a diagnostic assessment. Other parents commented about limited support for children's mental health after receiving a diagnosis.

We did

- Additional funding has been committed to mental health services to provide additional support to meet the needs of children & young people. Work is underway to review how services are delivered to meet needs in a timely and accessible way. Mental Health Support Teams are supporting 50% of schools in Shropshire.

Next steps

- Services have started to work as a system across Shropshire to articulate the full offer of support for emotional wellbeing and mental health support to ensure that children & young people are supported at the earliest opportunity from across sectors including education, health, social prescribing and the voluntary sector. Additionally, BeeU are exploring different models of mental health support including group support, increased in-school support, increasing the use of evidence based psychological interventions including family therapy, low intensity cognitive behavioural therapy and video interaction guidance which is providing additional support for children under 5.

Ensure capacity of the diagnostic service meets the demands of the population

You said

- The majority of parents commented that the diagnostic process was too long. One parent commented that a follow-up appointment by BeeU was yet to be completed. A number of parents reported that they pursued a private diagnosis rather than waiting.

We did

- Additional funding has been committed to ASD and ADHD diagnostic services across the age range. This will see an almost trebling of the workforce within BeeU, and is expected to reduce waiting times for ASD diagnostic assessments from 18 – 24 months, to around 6 months, and for ADHD from 12 – 18 months, to around 5 months.

Next steps

- Recruitment is underway in the diagnostic services across the age range to increase the capacity of diagnostic services to meet the current demand.

Section 2

Children and young people
with Speech, Language
and Communication Needs

Responses relating to children & young people with Speech, Language and Communication Needs

Of 75 responders we heard that a high number of parent carers and their children & young people had received support from

- School (**23**)
- ShropComm NHS Trust Speech & Language Therapy (**29**)

Significantly fewer responders were aware of the following support for speech, language & communication needs;

- Early Talk Talk Boost,
- ELKLAN,
- SENDIASS,
- PACC,
- Shropshire's School Readiness Leaflet
- Support from health visitor or school nurse
- SCHAT Speech & Language Therapy facebook page
- Speech & Language Therapy training
- SSLIC Team
- Stoke Speaks Out
- Speech Language UK Parent Carer Guide

Responses relating to Children and young people with Speech, Language and Communication Needs



Question: **I think that I have a good understanding of the support available for my child or young person**



Question: **My child or young person has been able to access the support available to them**



Question: **My child or young person received the support that they needed**



Question: **Over the past 6 months, whilst my child or young person was waiting to see a speech and language therapist the support we received has helped**



Ensure clarity about the support available

You said

- The responses indicate that parents aren't aware of all the support available for those with speech, language and communication needs, such as the Speech & Language Therapy advice line which doesn't require a referral. This was particularly evident for children & young people who were home educated. A number of responses were from families who had previously been known to Speech & Language Therapy but had subsequently been discharged. Families felt that the discharge had been too soon, and their children had not made sufficient progress.

We did

- Communication from the speech, language & communication needs workstream has increased, in the form of updates in the SEND newsletter and the education bulletin, as well as practitioners across the partnership understanding the range of support available. The Speech & Language Therapy advice line gives an opportunity for parents and schools of those children who have been discharged to speak to a Speech & Language Therapist about any escalation of needs or lack of progress based on the advice given at discharge.

Next steps

- Further links to be made with the home education team and TMBSS to ensure they can signpost to the support available. Further consideration from the Speech & Language Therapy service regarding rationale for discharge and clarity about this rationale.

Ensure good quality support for Early Years and Educational Settings

You said

- Some parents commented that their child's school have been excellent in supporting speech, language & communication needs, however others commented that School had not followed the advice given. Some parents commented that their child had been seen in nursery but not had a follow up call from Speech & Language Therapy.

We did

- There has been the continued training to schools and early years settings to enable them to run the Talk Boost programme, there has also been further support to enable schools to use different talk boost programmes, such as using the early talk programme or stoke speaks out in reception if appropriate. In spring / summer 24 there have been well attended advice sessions for schools and early years settings delivered by Speech & Language Therapy, these settings have included clarity about the support available from Speech & Language Therapy for a range of needs. This has included demonstration of the [iThrive model](#) for different clinical needs.

Next steps

- Through the ELSEC project we will provide additional support to targeted schools. This will support effective delivery of Talk Boost and provide schools and early years settings with extra support to meet the needs of children with speech, language and communication difficulties. to ensure parents are aware of speech, language & communication needs interventions taking place in schools, such as Talk Boost.

Ensure good quality support for parents and carers

You said

- A number of parents commented that the best support and advice they receive is from other parents whose children have similar needs. Other parents gave positive feedback about individual Speech & Language Therapists going the extra mile to support and explain. Many parents commented that the online training sessions were beneficial, 1 parent commented that they would prefer face to face support. As mentioned above a number of parents commented that their child's discharge from Speech & Language Therapy felt too soon, 1 response reported that they were discharged because they couldn't attend an online training session.

We did

- The Speech & Language Therapy service have clarified that a child won't be discharged because a parent can't make the date of an online training session, all training sessions are now recorded and the family are sent the link to view the video in their own time and then offered a follow up call with the Speech & Language Therapy advice line. We continue to promote the Speech & Language Therapy advice line for parents to contact if they want advice about their child whilst waiting or after having been discharged from the Speech & Language Therapy service.

Next steps

- Through the ELSEC project we will provide additional support to targeted schools to ensure parents are aware of speech, language & communication needs interventions taking place in schools, such as Talk Boost. Further consideration from the Speech & Language Therapy service regarding rationale for discharge and clarity about this rationale.

Ensure the capacity of the Speech & Language Therapy service meets the demands of the population

You said

- Parents commented that the waiting times are too long, particularly for those who are also waiting to be seen through the Multi Disciplinary Assessment process as well as Speech & Language Therapy. Some parents also expressed frustration that the support from Speech & Language Therapy was often in the form of videos, when the preference would be for direct Speech & Language Therapy. 1 parent reported mixed messages from different services (health visiting , Speech & Language Therapy and community paediatrics) about whether their child required Speech & Language Therapy or not.

We did

- The Speech & Language Therapy are completing a waiting list initiative in June and July 2024 to reduce those waiting the longest for Speech & Language Therapy to 40 weeks. There is a small scale Outreach Pilot underway in the Speech & Language Therapy service, this pilot is based on special school Speech & Language Therapys providing some support to children & young people in mainstream schools when they have particularly complex needs such as requiring alternative and augmentative communication. Initial feedback from this pilot covering North and Central Shropshire (Alison P to confirm) is that the outreach support has enabled school settings to feel more confident to meet the needs of children with complex difficulties. A communication partner training package has also been developed to compliment this pilot.

Next steps

- There will be an evaluation of the impact of the Outreach Pilot and consideration of next steps based on this evaluation.

Section 3

Children and young people with an EHCP or going through the EHCP process

Responses relating to Children and young people with an EHCP or going through the EHCP process

Question: **When the Education, Health and Care Needs Assessment (EHCNA) or annual review was requested, my CYP's wishes and aspirations for the future were recorded and captured in the application.**

Question: **Professionals accurately reflected my CYP's needs in their reports**

Question: **I felt listened to and included by the professionals involved in their CYP's assessment/review**

Question: **During the EHCNA/review process, I felt my CYP was included and well supported at their educational setting**

Agree Disagree



Responses relating to Children and young people with an EHCP or going through the EHCP process



Question: **My CYP's wishes and aspirations for the future were reflected in the plan**



Question: **I felt that the plan accurately described my child**



Question: **I felt that the EHCP meets my CYP's special educational needs**



Question: **The plan was delivered on time, within the expected timeframe.**



Question: **My CYP has received an annual review in the last 12 months**



Ensure that the SEN Team communicates with parents/carers at every stage in the process

You said

- Eleven responders felt that there was a lack of communication from the SEN Team. This meant they did not feel informed about the progress of their application. This was especially a concern when timescales were not going to be met.

We did

- The SEN Team at the LA have introduced a communication policy where parent carers will be contacted at each stage of the process to keep them informed of progress and any delays. We continue to expand the use of an online portal for schools to streamline the communication between schools and the LA. We are introducing an online digital platform that will make processes much more transparent for all people involved in the process, including parent carers and young people.

Next steps

- Ensure full implementation of the communication policy. Continue to look at the range of online systems available and procure where necessary.

Ensure that everything possible is done to keep to statutory timescales

You said

- Timeliness continues to be an issue for both new and amended EHCPs. 28 parent carers raised this as an issue. There are sustained high levels of needs and complexity within the population. There were 310 requests for assessment to April 2024 compared with 161 to April 2022 and 86 in 2021. There is also a backlog of plans already in the system, affecting the ability of the SEN Team to improve timeliness. In 2023 38.3% of new plans were issued on time.

We did

- Internal processes are being examined and automated processes introduced where appropriate. Staffing has been reviewed and changes made to numbers and team structure, to support new processes and ensure quality during these changes.

Next steps

- Digitisation of the EHCP processes to improve automation and communication for processes, allowing staff to concentrate on completing quality EHCPs on time. A review of annual review processes is also intended to impact on timeliness of amended plans.

Ensure that EHCPs meet our child's needs and are of good quality

You said

- 8 Parent carers mentioned that the EHCP they received was not of sufficient quality.

We did

- All EHCPs now go through a rigorous QA process. As a result, there has been a marked improvement in the % of initial and amended plans that are rated good or better. There has been a rollout of a considerable training package across education, health and social care with multiagency oversight to ensure that the advice feeding into EHCPs is of sufficiently high quality. Advice is now sought from education separately from the application process. This has already improved the quality of education advice. New EHCNA paperwork has been launched and has received initial positive feedback

Next steps

- Continued application of the Quality Assurance Framework will maintain the quality of new and amended EHCPs

EHCPs rated good or better	Feb-24	May-24
% Draft EHCPs	59%	86%
% Amended EHCPs	77%	98%

Ensure that settings meet the needs of children and young people as specified on their EHCP

You said

- Six parent carers indicated that educational settings were not meeting the needs of their child or young person and a further two suggested that schools were not listening to parents

We did

- The launch of the Shropshire Ordinarily Available Provision document (SOAP) and toolkit is designed to support Education settings in determining the SEN of children and young people and support available and to clearly define what schools might be expected to provide for children and young people with SEND. We have recruited Education Quality Improvement Advisers to work with the full range of settings to support quality improvements. There is ongoing training within Education, Health and Social Care regarding writing good advice, and ongoing training and support for SEN Case Officers to ensure that EHCP outcomes are clear and measurable.

Next steps

- We continue to encourage all schools and settings to strengthen their graduated response to children and young people with SEND including support for mental health and emotional well-being. This will include evaluating the strength and consistency of provision currently available in mainstream education settings.

Ensure that social care needs are sufficiently included in the EHCP

You said

- A small number of parent carers reported that social care requests are lost on the process or that EHCPs did not consider social care needs enough.

We did

- Social care questionnaires have been implemented with every Education, Health and Care needs assessment (EHCNA). A social care questionnaire is provided to ensure their advice plays a key role in getting the right support, at the right time. These questionnaires were co-produced with PACC and SENDIASS. 65 have been completed and returned between Feb and May 2024. Of these 27 (42%) of the children were previously 'not known' to Social Care or Targeted Early Help. All Social care questionnaires are triaged and all requests for support are responded to appropriately either with signposting information, including to the Early Help Hubs and support drop-in's, or through the offer of an Early Help Whole Family Assessment. Some families, through completion of the questionnaires, have shared that they feel adequately supported via their existing support networks of wider family and friends or through their local community and therefore do not require any further action.

Next steps

- We will continue to develop a rolling social care workforce training programme for all practitioners completing statutory EHC advice incorporating Council for Disabled Children's training resources.

Ensure that annual reviews happen when they should and that EHCPs remain up to date

You said

- A number of parent carers reported that annual reviews were not happening when they should and that amendments were late. A few also commented that outcomes on their child or young person's EHCP were not updated and were out of date.

We did

- there is a new Annual Review Template for educational settings to complete as well as updated guidance on the [Local Offer](#) on roles and responsibilities regarding Annual reviews and education settings.

Next steps

- We are embarking on an annual review recovery programme. We have carried out a data cleanse and have improved our recording and monitoring systems. The SEN Team are currently carrying out a review of annual review processes to ensure they are as efficient as possible and are appropriately prioritised and are completed within the statutory 12 months. We are also creating a suite of co-produced new annual review guidance for key phase transition and preparation for adulthood

Further information

Further information about steps taken to address Shropshire's SEND Accelerated Progress Plan can be found here:
[app-6-month-review-november-2023.pdf \(shropshire.gov.uk\)](#)