

Ealing Local Area SEND Strategic Improvement Plan



Ealing's vision for children and young people with special educational needs and disabilities (SEND)

Ealing's vision for children and young people with special educational needs and disabilities (SEND) is **clear, ambitious**, and rooted in the principle that **every child should be welcomed, valued, and supported to thrive within their local community**. Ealing's strategy for Additional Needs and SEND 2023-27 is built on inclusion, early identification, strong partnerships, and a determination to improve outcomes and life chances for all.

At the heart of these strategic outcomes lies a borough-wide commitment to equity, participation and ambition. Ealing partners believe that every child and young person has the right to be heard, to be included, and to succeed. **We are actively working together to remove barriers, reduce inequalities, and challenge low expectations.**

This vision is supported by strong multi-agency governance, data-informed decision making, a culture of continuous reflection and active collaboration with the Ealing Parent Carer Forum, the Youth Social Network, and voluntary sector partners including Ealing Contact, Ealing Mencap, the Anchor Foundation and Ealing SENDIASS) whose contributions are central to ensuring services are shaped by and accountable to the people who use them.

We recognise that co-production is fundamental to service development and continual, consistent collaboration with our parents and carers is critical in ensuring the child is always at the centre of every discussion and decision in how we take our services forward.

We work transparently and in partnership with Ealing Parent Carer Forum, the Youth Social Network and our key community and voluntary service organisations (including Ealing Contact, Ealing Mencap, the Anchor Foundation and Ealing SENDIASS) to ensure there is representation for local families experience at every level of our SEND strategic governance, in line with national expectations from the Department for Education and the Department of Health and Social Care.

Ealing's strategy for Additional Needs and SEND 2023-27 - Priority Areas

Priority 1	To provide guidance, early identification of need and support for children young people and their families, so that schools and settings are supported to welcome every child and young person and set the highest expectations for them.
Priority 2	Every child and young person is prepared for the transition to a purposeful adulthood with opportunities for training and meaningful employment.
Priority 3	Ensure parents, young people and professionals work together to assess, review, and meet needs and improve the quality and timeliness of Education Health and Care Plans through co-production.
Priority 4	Ensure sufficiency and quality of provision in settings, schools, and services so that children and young people can have their health, social care and educational needs met and feel part of the wider local community.
Priority 5 (added July 2024)	To improve the frequency, accessibility and quality of communications with families and between area partners.

Area SEND Inspection

An Ofsted (Office for Standards in Education, Children's Services and Skills) and CQC (Care Quality Commission) inspection of services provided by Ealing's Local Area Partnership was conducted in October 2025.

The overall outcome of the October 2025 Local Area SEND Inspection was: "The local area partnership's arrangements lead to inconsistent experiences and outcomes for children and young people with special educational needs and/or disabilities (SEND). The local area partnership must work jointly to make improvements."

In response to the inspection, Ealing's Local Area partnership has developed a strategic plan based on the recommendations set out in the report. These outline specific actions to achieve the outcomes identified in the inspection report. The additional improvement plan below will be incorporated into the current partnership SEND & Inclusion strategy implementation plan (2023 – 2027). Progress on the priority areas will be monitored through existing governance and accountability arrangements. It will include the monitoring of a joint set of key performance indicators (KPIs) by the Ealing's Strategic Partnership Board for SEND and Inclusion who holds the governance role for all SEND Area Partnership work. Ealing's Strategic Partnership Board for SEND and Inclusion is attended by professionals across Education, Health and Care, community partners and parent representatives. The board reports to our jointly led Children Young People Partnership Board. The current governance structure can be viewed in appendix 1.

The following sections outline the strengths and areas for development outlined in the plan, and details the actions the Local Area Partnership will take to further improve provision for children and young people with SEND.

The full inspection outcome report can be viewed here: [London Borough of Ealing - Open - Find an Inspection Report - Ofsted](#)

Areas of Strength

Children and young people with SEND in Ealing benefit from an inclusive and proactive culture in mainstream schools, supported by skilled practitioners and effective interventions. Most experience smooth transitions between education settings, resulting in high numbers in education, employment, or training.

“Children and young people with SEND benefit from an inclusive and proactive culture, fostered by the Ealing Learning Partnership school effectiveness team. Skilled practitioners provide a range of meaningful interventions, and most students experience smooth, well-planned transitions between education settings.”

“Across all phases and types of education, children and young people with SEND typically achieve strong academic outcomes, enjoy their learning, and feel well supported.”

“The number of children and young people with SEND who are in education, employment, or training is high.”

The new leadership team has brought stability and a renewed focus on improving experiences and outcomes for children and young people with SEND. The appointment of a full-time Designated Clinical Officer and robust SEND improvement plans reflect this commitment.

“Robust SEND improvement plans are in place, shaped by the views of children, young people, and parents/carers.”

There is a strong focus on identifying and addressing needs early, including strategies that allow access to specialist nursery provision without requiring a diagnosis or EHC plan in the early years.

“A strategy allows children to access specialist nursery provision without needing a diagnosis or EHC plan, ensuring needs are met at the earliest stage.”

“Children’s centres, parenting programmes, and youth services provide effective early support to children, young people with SEND, and their families.”

The voices of children, young people, and parents/carers meaningfully shape service development. Groups like the care leavers group and Youth Social Network influence strategy, and parents are active members of SEND boards.

“Children, young people, and families meaningfully shape service development. Groups like the care leavers group and Youth Social Network influence strategy and coproduce services.”

“Parents and carers are key members of SEND strategy boards and are actively involved in shaping services and decisions.”

A range of well-resourced services (e.g., Contact Ealing, Ealing Mencap, children’s centres) provide tailored support, signposting, and emotional support to families.

“Services such as Contact Ealing, Ealing Mencap, Ealing SEND Information and Advice Support Service, Ealing Parent Carer Forum, and Ealing Anchor Foundation provide extensive support and advice.”

“Children’s centres offer tailored support, including music therapy and support at home, fostering community engagement and emotional support.”

The partnership has robust mental health support, with Mental Health Support Teams in most schools and effective safeguarding and oversight for children in residential special schools.

“The partnership has a robust and inclusive mental health support system, with Mental Health Support Teams working with most schools. Children and young people are actively supported throughout their CAMHS journey, with smooth transitions between pathways.”

“Robust oversight arrangements are in place for children and young people with SEND in residential special schools, with frequent monitoring and suitable safeguarding.”

The DSR functions effectively, providing timely and impactful support for children with autism and/or learning disabilities and complex mental health needs, preventing unnecessary hospital admissions.

Areas for Development

Area of Improvement 1: Reduction of Wait Times

- **The local area partnership should implement recovery plans at pace in order to reduce the lengthy wait times for:**
 - **Wheelchair services**
 - **Speech and language therapy**
 - **Neurodevelopmental assessments**
- **The partnership should also ensure that there is effective mitigation in place for children and young people waiting for assessment and diagnosis from health services and that they can access appropriate support while they are waiting.**
- **The partnership should ensure that there is a consistent programme of training and quality assurance in relation to annual health checks.**

Narrative from Inspection Report

- Children and young people's access to neurodevelopmental assessments varies dependent on their age. Those under the age of six are typically assessed in a timely manner. In contrast, those over the age of six often face extended waits for diagnostic assessments. Although support services are available during this period, there is no formal oversight of the waiting list by practitioners or leaders across the partnership. This means that opportunities to review whether needs have changed or additional support is required are sometimes missed. The partnership has developed a robust plan to address this, but it is too soon to see the impact that this plan has had.
- Children and young people with SEND who have speech, language and communication needs are seen promptly for an initial assessment, where they receive specific advice and guidance. However, there is then often a significant delay in receiving the specialist support that they require. This can adversely affect children's and young people's progress and outcomes.
- Some children and young people with SEND wait too long to receive support from wheelchair services. This can be either for a new chair, replacement or repair. This means some children and young people remain without appropriate mobility support for prolonged periods. This has resulted in some being left in discomfort and without the wheelchairs necessary to meet their physical needs.
- The partnership should also ensure that there is effective mitigation in place for children and young people waiting for assessment and diagnosis from health services and that they can access appropriate support while they are waiting.
- Leaders across the partnership are ambitious to improve the primary care offer for children and young people with SEND, including sustaining learning disability health checks at a high rate and streamlining access via the child health hub. However, the partnership recognises there is inconsistent training and quality assurance in annual health checks, a lack of shared care agreements for prescribing medication and missed opportunities for multi-agency working. Primary care is not routinely involved in EHC plan processes, nor do they receive a final copy of the child or young person's plan. This limits their understanding of a child or young person's full needs. These gaps result in delays and inequity in health care, despite timely referrals and a clear commitment to improvement.

Responsible Governance Group:

SEND and AP Partnership Board

Area of Improvement 1: Reduction of Wait Times

Action no.	Action	Date Due	How will we know this is working?	Responsible Officers
1.1	<p>1) Continue to improve waiting times for CAMHS through expanded operational hours, use of an external provider and targeted waiting-list initiatives across providers.</p> <p>2) Work with NWL ICB and partner providers to improve and maintain integrated oversight of waiting lists, while maintaining robust provider-level governance, safety oversight and prompt re-prioritisation where needs change.</p> <p>3) Ensure families are supported while waiting by providing clear contact routes, regular validation of waiting lists, and access to resources, advice and ICB-commissioned voluntary and community sector support irrespective of diagnosis.</p>	Q2 2026	<p>As a partnership, we will</p> <ul style="list-style-type: none"> • Have a shared understanding of what providers and commissioners are doing to reduce the waiting times • Have an increased visibility on performance and pressures, thus focus our attention where needed to reduce waiting times • Be assured on a regular basis 	<ul style="list-style-type: none"> • CAMHS SEND Leads • CAMHS Operational Manager • Associate Director – CAMHS • Programme Delivery Manager – CYP MHLDA, ICB
1.2	<p>1: those without EHCPs - work is underway to review children on Ealing Community Partners Children’s therapy waiting list to ensure they meet criteria for specialist input; solutions will include OGMA therapy app (AI tool) which is being trialled to support the reduction in admin to allow for uptake of more children for therapy.</p>	Q4 2026	<ul style="list-style-type: none"> • There will be reductions to number of the CYP on the waiting list by 20% in year 1; • Referrals to the waiting list will be triaged more effectively across NHS providers and SENAS with a codified process embedded along with staff training • There will be a reduction in waiting times and allocations by 10% by end of Q1 and a new target agreed each quarter • Improved patient satisfaction and parent/education staff reporting improved confidence in supporting their child with SEND • We continue to use EKOS and GAS outcome measure and are aiming for improvement by a minimum of 10% post therapy intervention • Regular updates will be provided to the SEND and Inclusion Partnership Board 	<ul style="list-style-type: none"> • Clinical Services Manager • Professional AHP • Paediatric Therapy Lead • Head of SEND and AP
1.3	<p>2: those with an EHCP - The Ealing Community Partners Children’s Services is currently at capacity and hold a waiting list of children with issued plans. LA provide some private input to some children waiting. Work is underway to transfer list of current children and those on waiting list to LA to hold as our commissioners. LA will then notify NHS of those next on the waiting list to be seen.</p>	Q1 2026	<ul style="list-style-type: none"> • There will be reductions to number of the CYP on the waiting list by 20% in year 1. • Referrals to the waiting list will be triaged more effectively across NHS providers and SENAS, and there will be a reduction in waiting times and allocations by 10% 	<ul style="list-style-type: none"> • Head of SEND and AP • Head of Children’s Services and Specialist Adult Therapy Services
1.4	<p>Implementation of new community healthcare contract for SLT intervention in Section F for those with an ECHP to enable increased responsiveness to interventions from private services via brokerage or NHS via the new contract</p>	Q4 2026	<ul style="list-style-type: none"> • Contract in place with additional capacity identified allowing provision gap to be closed with brokerage providers. Reduction of 10% on waiting list per quarter 	<ul style="list-style-type: none"> • Assistant Director SEND and Inclusion • Head of Children’s Services and Specialist Adult Therapy Services

Area of Improvement 1: Reduction of Wait Times

Action no.	Action	Date Action is Due	How will we know this is working?	Responsible Officers
1.5	<p>Wheelchair Services</p> <p>a)AJM and Therapies Services will establish monthly operational meetings to support service improvement.</p> <p>b)AJM will</p> <ul style="list-style-type: none"> complete a full review of all existing SOPs, including escalation routes and reporting expectations. produce a quarterly performance report for each SEND & Inclusion Partnership Board meeting, design and launch a quarterly newsletter for service users and this will be distributed to 100% of registered families and service users via agreed communication channels 	Q1 2026	<ul style="list-style-type: none"> AJM waiting list will come down SOP Review will result in updated and improved processes Service users feedback and survey will improved satisfaction and engagement SEND & Inclusion Partnership Board will be assured on a regular basis 	<ul style="list-style-type: none"> AJM Regional Manager, South Head of Children's Services and Specialist Adult Therapy Services Clinical Services Manager & Professional Paediatric Therapy Lead DCO SEND for Ealing
1.6	<p>Health Providers will</p> <p>a) Ensure a yearly audit of annual health check (AHC) is completed</p> <p>b) Establish a rolling annual training programme on conducting AHCs, delivered at least twice a year.</p> <p>c) Ensure the Neighbourhood Teams will implement proactive outreach and follow-up processes to identify and address missed opportunities for care and support, including non-attendance and unmet needs.</p> <p>d) Strengthen the identification and support of children and young people with SEND in GP practices by:</p> <ul style="list-style-type: none"> implementing EHCP alert mechanisms on GP clinical systems where an EHCP exists ensuring the SENAS team sends a completed copy of each EHCP to the relevant GP practice encouraging GP practices to apply appropriate SNOMED codes to patient records 	<ul style="list-style-type: none"> Q2 2026 Q4 2026 	<ul style="list-style-type: none"> The annual Health check audit will show an improvement in the quality and consistency of health checks across the borough Training attendance, evaluation feedback, improvements in practitioner confidence and compliance will be monitored and reviewed annually. Outcomes will be regularly monitored through case tracking, engagement rates, and escalation records, Compliance will be monitored through sample audits and GP feedback, Progress reported quarterly to the SEND & Inclusion Partnership Board. 	<ul style="list-style-type: none"> Designated Clinical Officer Head of Children's Services and Specialist Adult Therapy Services Clinical Services Manager & Professional Paediatric Therapy Lead Head of Community team for People with learning Disabilities (CTPLD)
1.7	<p>Shared Care</p> <p>a) A standardised approach to shared care agreement across the whole of West & North London ICB s being developed and will be implemented as there is no Ealing-specific shared care agreement.</p> <p>b) In the meantime, every case will be risk assessed and supported accordingly</p>	Q1-2026	<p>Regular update will provided to the SEND & Inclusion Partnership Board on</p> <ul style="list-style-type: none"> progress made by West & North London ICB on the standardisation of the shared care agreement how individual cases are managed across the system 	<ul style="list-style-type: none"> Designated Clinical Officer (ICB) Associate Dir, Mental Health, Learning Disability & Autism (ICB)

Area of Improvement 2: Coordination and communication

- The local area partnership should improve the coordination of services, support and communication between practitioners, the child or young person with SEND and their family so that needs are identified and met more quickly and effectively
- The local area partnership should improve, clarify and effectively communicate the guidance and support in place to enable CYPs and families to prepare for adulthood, taking into account key transition points; including clarifying offers such as travel training and access to transition services.
- The Partnership should ensure that primary care is routinely involved in EHC plan processes and receive all relevant documentation, including the final copy of the child or young person's plan.
- The Partnership should formulate a communication plan, including the development of the local offer, to ensure effective and frequent communications and more effective signposting for families and professionals.

Narrative from Inspection Report

- Children and young people with SEND experience an inconsistent support and guidance to prepare them for adulthood. Practitioners across education, health and social care do not always collaborate effectively. This means that the quality of support provided to children and young people varies significantly. For example, travel training and access to transition services are not universally available, with some young people with SEND receiving a comprehensive offer while others do not. This variability is reflected in children and young people's EHC plans, which often lack appropriately personalised planning for transition.
- Leaders across the partnership are ambitious to improve the primary care offer for children and young people with SEND, including sustaining learning disability health checks at a high rate and streamlining access via the child health hub. However, the partnership recognises there is inconsistent training and quality assurance in annual health checks, a lack of shared care agreements for prescribing medication and missed opportunities for multi-agency working. Primary care is not routinely involved in EHC plan processes, nor do they receive a final copy of the child or young person's plan. This limits their understanding of a child or young person's full needs. These gaps result in delays and inequity in health care, despite timely referrals and a clear commitment to improvement.
- Children and young people with SEND can access a broad range of services designed to support their health, care and education needs. Across the local area partnership, provision ranges from emotional wellbeing and mental health support to specialist workshops and family support. However, the experiences of children and young people with SEND, and their families, are influenced not just by the availability of these services, but by how well they are coordinated by practitioners and understood and accessed by families. This leads to inconsistent support for some children, young people and their families.
- Children and young people with SEND can access a broad range of services designed to support their health, care and education needs. Across the local area partnership, provision ranges from emotional wellbeing and mental health support to specialist workshops and family support. However, the experiences of children and young people with SEND, and their families, are influenced not just by the availability of these services, but by how well they are coordinated by practitioners and understood and accessed by families. This leads to inconsistent support for some children, young people and their families.
- Practitioners across education, health and social care are not consistently working in a joined-up way, which has a detrimental impact on the timeliness and quality of support provided. When children and young people with SEND do receive services, they benefit from a workforce across education, health and social care who are thoughtful, committed and dedicated to making sure that most children and young people with SEND receive what they need when they need it. There is a range of early help services, including children's centres, parenting programmes and youth services, which provide effective early support to children, young people with SEND and their families. However, there are challenges in how effectively services and support are coordinated around children and young people with SEND.

Responsible Governance Group:

SEND and AP Partnership Board

Area of Improvement 2: Coordination and communication

Action no.	Action	Date Action is Due	How will we know this is working?	Responsible Officers
2.1	Create and deliver a cycle of multi-agency training to ensure that communication is improved and ensure that services are more aware of ways of working and thresholds in wider service areas.	Q3 2026	<ul style="list-style-type: none"> Cycle of training planned and delivered across health social care and education, evaluated by surveys and impact measured by performance indicators outlined in service plans. 	<ul style="list-style-type: none"> Assistant Director SEND and Inclusion Head of SEND and AP Designated Clinical Officer
2.2	Plan a series of SEND engagement events to ensure that there are mechanisms for more effective feedback and communications to/from parents and carers, and that their voices can inform the creation and review of the new send strategy	Q2 2026	<ul style="list-style-type: none"> Roadshow of parent events co-designed and delivered across Ealing, in venues across the 7 towns You said .. We are doing... feedback loop implemented Parent/ Carer newsletter created and circulated via parent orgs and LO - co designed with Contact Ealing Parent survey and small group feedback sessions facilitated by Contact Ealing and the council will provide both qualitative and quantitative measures of impact. 	<ul style="list-style-type: none"> Assistant Director SEND and Inclusion
2.3	Local Offer (LO) website is updated, and new version of the site is co produced with parents/ carers and YP.	Q3 2026	<ul style="list-style-type: none"> LO website is launched and is underpinned by clear evidence of co production involving CYP and parent/carers. 	<ul style="list-style-type: none"> Assistant Director SEND and Inclusion
2.4	Partners will actively contribute towards PfA and transition planning by: <ol style="list-style-type: none"> Working with education & social care to strengthen health input into PfA transition protocols and personalised plans Delivering transition-focused training to at least 80% of relevant health practitioners Reviewing (CAMHS) and enhancing Link Worker and handover arrangements to adult services are in place. Completing a mapping exercise of transition health services, identifying gaps in access, including specialist provision. Co-producing and publishing accessible guidance on available health services during transition for families. Monitoring outcomes for young people with SEND during transition to ensure continuity of care. 	Q3 2026	<ul style="list-style-type: none"> Protocol will be signed off by the SEND & Inclusion Partnership Board Compliance will be monitored through EHCP sampling audits The guidance will be co-produced with families, reviewed annually, and promoted through SEND communication channels. Families will report smoother transitions into adult services as evidenced by focus groups case tracking showing evidence in improved timeliness and quality. Audits of annual review and amended EHCPs. 	<ul style="list-style-type: none"> Designated Clinical Officer Head of Children's Services and Specialist Adult Therapy Services Clinical Services Manager & Professional Paediatric Therapy Lead 0-19 Services Lead Assistant Director Adults Social Care CAMHS SEND Leads

Area of Improvement 2: Coordination and communication

Action no.	Action	Date Action is Due	How will we know this is working?	Responsible Officers
2.5	Co produce the LAP transition strategy and provision, ensuring that this is published on local offer and accessible to families and practitioners as a useful guide; includes series of p2 workshops and engagement events	Q3 2026	<ul style="list-style-type: none"> LAP transition strategy is co produced and published on LO Feedback from CYPs, settings and families indicate that there is greater clarity on provision available to families EHCPs show clearer indications of PfA in relation to each transition phase. 	<ul style="list-style-type: none"> Head of Virtual School Assistant Director SEND and Inclusion
2.6	Finalise provision map outlining services available to support transitions across health education and care, and ensure that this is on the local offer and accessible to families CYPs and practitioners	Q3 2026	<ul style="list-style-type: none"> LAP transition strategy is co produced and published on LO Feedback from CYPs, settings and families indicate that there is greater clarity on provision available to families EHCPs show clearer indication multi-agency planning in relation to PfA at every transition phase. 	<ul style="list-style-type: none"> Head of Virtual School Assistant Director SEND and Inclusion
2.7	Offer training, guidance and resources to GPs to enhance Primary Care understanding of the holistic needs of children and young people with SEND, including their role in the EHCP processes.	Q4 2026	<ul style="list-style-type: none"> Training delivered or cascaded to all GP using Ealing clinical forums attended by all GPs across Ealing New GP Handbook being co-produced with parents and cares and YP . Follow up spot surveys of GPs to assess impact. 	<ul style="list-style-type: none"> Designated Clinical Officer Ealing GP Lead
2.8	Ealing Council SEND and Inclusion to ensure that EHCP applications, reviews and plans are shared with a wider range of health services including primary care e.g. GPs, 0-19 services.	Q2 2026	<ul style="list-style-type: none"> 100% of requests for assessment to be shared with wider range of health services to ensure that there are more opportunities for practitioners to contribute to new plans 100% of annual reviews conducted from Sept 2025 to be a shared with wider health services 100% of new or amended drafts and final plans issued from Sept 2025 to be shared with wider health services Health services have a clear process for uploading and sharing plans to ensure that these are accessible to practitioners. 	<ul style="list-style-type: none"> Assistant Director SEND and Inclusion Designated Clinical Officer

Area of Improvement 2: Coordination and communication

Action no.	Action	Date Action is Due	How will we know this is working?	Responsible Officers
2.9	<p>The partnership will</p> <ul style="list-style-type: none"> a) embed the voice of the child and families in all relevant processes, b) improve the quality and consistency of advice given through staff training c) strengthen multi-agency working, and coordination across team d) ensure robust transition planning through clear accountability, training, audit and data-led improvement e) develop clearer pathways for health professionals(including GPs) to contribute to EHCP and its annual reviews ensuring transition needs are identified early and addressed consistently. 	Q3 2026	<ul style="list-style-type: none"> • Spot checking records/ 'dip- sampling' of EHC plans will show an increase of the child & families voice in the plans • Stakeholders will report that health advice is clear, sufficient and actionable. • Roles and responsibilities of health services will be understood and referenced by all partners • Young people and families report feeling better prepared for adulthood and transition which will be measured via the case tracking and questionnaires/ surveys completed at annual review. The local offer PfA site will have an open survey. • CYP will feel more supported with comprehensive high-quality EHCPs catered to their needs, which are updated in a timely fashion to reflect their ongoing educational development • Voice of the child captured at all stages from section 23 notifications, ERSA, EHCP assessment, annual reviews and transitions. Evidenced by audit and feedback from service users 	<ul style="list-style-type: none"> • Assistant Director SEND and Inclusion • Designated Clinical Officer • Head of Children's Services and Specialist Adult Therapy Services • Clinical Services Manager & Professional Paediatric Therapy Lead • 0-19 Services Lead • CAMHS SEND Leads
2.10	<p>Realignment of Early Start and Early Start Inclusion services to ensure that there is a streamlined approach to identification, assessment and intervention across both teams, with clear communication pathways, shared training and effective handovers; ensure that the support is clarified for parents and professionals</p>	Q4 2026	<ul style="list-style-type: none"> • Clear identification, assessment and intervention pathway communicated to practitioners and families via the LO. • 50% Parent feedback indicates more clarity in relation to the support on offer (survey and interviews) • Clear process of step up and step down of case loads • 50% of case audits show that early intervention is implemented at the earliest identification point • 75% of case work is evaluated and shows positive impact of the interventions 	<ul style="list-style-type: none"> • Assistant Director SEND and Inclusion • Assistant Director Early Help

Area of Improvement 3: Quality of Plans

- The local area partnership should improve the quality of EHC plans, including the contributions from multi-agency practitioners, and update plans in a timely way so that they accurately reflect the current needs, and the support to meet these needs, of the child or young person.
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- The local area partnership should update plans in a timely way so that they accurately reflect the current needs, and the support to meet these needs, of the child or young person.

Narrative from Inspection Report

- There is variability in the quality and timeliness of children and young people's EHC plans. Recent EHC plans are updated more swiftly after annual reviews. They reflect well the voice and need of the child or young person with SEND, have ambitious outcomes and clearly identify the contribution of other agencies. The partnership has been working at pace to ensure that quality and timeliness are a priority for improvement, and this is evident in more recent plans. However, some variability remains.

Responsible Governance Group:

SEND and AP Partnership Board

Area of Improvement 3: Quality of Plans

Action no.	Action	Date Action is Due	How will we know this is working?	Responsible Officers
3.1	Audit EHC plans alongside area partners to ensure that the documentation is compliant and that lived experience is tracked and monitored via case tracking QAs	Q3 2026	<ul style="list-style-type: none"> • Full cycle of case tracking and QA implemented and evaluated. (research indicates that number is not critical above 6 - case tracking themes are broadly the same above this number.) • Areas for development and trends identified and service wide improvement actions implemented to ensure that the quality of plans continue to improve. • 360 evidence base to be implemented and include interviews with CYP and families for all audits. • Improvement of plans rated good or above to rise to 75% as evidenced by auditing. 	<ul style="list-style-type: none"> • Assistant Director SEND and Inclusion • Designated Clinical Officer • Head of SEND and AP
3.2	Deliver cycle of training for SENAS, EPS, social care to ensure quality of advice improves and that agreed standardised language is used for frequency and quantity of provision	Q2 2026	<ul style="list-style-type: none"> • Full cycle of training mapped out and delivered over the course of the year; • Training feedback and QA shows the training is effective well received • Audits and spot checks show that practice is improving and learning is being implemented as business as usual • Improvement of plans rated good or above to rise to 75% 	<ul style="list-style-type: none"> • Assistant Director SEND and Inclusion • Head of SEND and AP
3.3	Audit of the quality of EP advice and reports, particularly those that are provided by agency and locums (50% of reports issued from Jan 2026)	Q4 2026	<ul style="list-style-type: none"> • Full cycle of case tracking and QA implemented and evaluated. • Areas for development and trends identified and service wide improvement actions implemented to ensure that the quality of plans continue to improve. • 360 evidence base to be implemented and include interviews with CYP and families for all audits • Improvement in quality of reports rated good or above to rise to 75% • Co production meeting show improved accuracy and appropriateness of advice in 75% of reports 	<ul style="list-style-type: none"> • Assistant Director SEND and Inclusion • Head of SEND and AP
3.4	CAMHS will continue to: a) audit EHCP contributions to confirm consistent use of the existing CAMHS EHCP contribution protocol b) Work with the local authority to address portal delays and with CAMHS external providers to ensure outsourced ASC contributions are submitted on time and in line with the agreed protocol	Q3 2026	<ul style="list-style-type: none"> • Audit findings showing improved compliance with CAMHS EHCP protocol • Increased 75% EHCP health contributions submitted within statutory 6-week timescales as evidenced in regular data monitoring . 	<ul style="list-style-type: none"> • Consultant Clinical Psychologist & CAMHS Head of Psychology • Head of SEND and AP

Area of Improvement 3: Quality of Plans

Action no.	Action	Date Action is Due	How will we know this is working?	Responsible Officers
3.5	Identify complex cases for multi-agency annual review and identify key LAP strengths and areas of development, with the aim of process and implementation plan being formulated and in progress	Q4 2026	<ul style="list-style-type: none"> All EHC plans for Y9+ include personalised transition planning The most recent multi-agency contributions are included and evident in all plans, ensuring that there are contributions from a range of services including wide ranging health services and GP Section A revised format is consistent with feedback from inspection Co production meetings feedback is gathered and shows effective co production of plans; Requirements of review process is codified and shared across the partnership to aid compliance 	<ul style="list-style-type: none"> Assistant Director SEND and Inclusion Designated Clinical Officer Head of SEND and AP
3.6	Deliver the annual review clearance via the backlog team - ensuring that at least 50% of plans are updated with most recent diagnosis and advice in year 1.	Q4 2026	<ul style="list-style-type: none"> All EHC plans for Y9+ include personalised transition planning The most recent multi-agency contributions are included and evident in all plans, ensuring that there are contributions from a range of services including wide ranging health services and GP Section A revised format is consistent with feedback from inspection Co production meetings feedback is gathered and shows effective co production of plans; Requirements of annual review process is codified and shared across the partnership to aid compliance 50% of EHCP plans updated by year end 	<ul style="list-style-type: none"> Assistant Director SEND and Inclusion Head of SEND and AP

Area of Improvement 3: Quality of Plans

Action no.	Action	Date Action is Due	How will we know this is working?	Responsible Officers
3.7	0-19 Service to Audit quality of health advice via peer audits.	Q3 2026	<ul style="list-style-type: none"> Audit cycle will show gradual improvement via scoring of different areas. 	<ul style="list-style-type: none"> Head of Clinical Services - Early Start Ealing 0-19 Service
3.8	<p>Strengthen the consistency in the quality and timeliness of health advice and contributions to EHC plans by:</p> <ul style="list-style-type: none"> a) Undertaking audit cycle of EHCP to compare advice against statutory guidance and local standards b) Monitoring advice provides clarity and specificity c) Ensuring timeliness of input into the EHCP d) Establishing strong family and practitioner feedback loop e) Enhancing the health advice on the quality of EHCP f) Increasing professional learning and training, including "Not Known to Service" response (from 3.8) g) Ensuring reports are submitted promptly after annual reviews 	Q3 2026	<ul style="list-style-type: none"> Audit cycle will be used to generate quality assurance scores and tracked EHCP health advice will have reduced variation in quality across different practitioners. The proportion of advice judged "clear and actionable" in peer reviews will be tracked Health advice will be provided within statutory timescales more consistently. Feedback from families and practitioners on health advice will be monitored There will be fewer tribunal challenges or complaints due to inadequate health input. Surveys or reflective logs will be used to measure professional growth. Benchmarking against other local areas will be undertaken 	<ul style="list-style-type: none"> Designated Clinical Officer Head of Children's Services and Specialist Adult Therapy Services Clinical Services Manager & Professional Paediatric Therapy Lead

Appendix 1 - SEND Governance

This is a summary of our overall governance which highlights responsibilities/ roles to oversee and deliver this strategic plan.

