
1. Introduction

The Code of Practice, 2015 states, ‘the EHC needs assessment and plan development process should be supported by senior leadership teams monitoring the quality and sufficiency of EHC needs assessments through robust quality assurance systems.’

This document describes North Somerset’s response to the Code of Practice and includes information on the processes it uses to measure and monitor the quality of the EHC needs assessment process and EHC plans (EHCP) for children and young people with SEND (0-25)

It describes the roles and responsibilities of those involved in assuring the quality and consistency of assessment practices, robust oversight of processes and clear responsibility for ensuring that learning from this oversight improves the experience for children and families.

Although the responsibility for ensuring that the processes described in the Code of Practice are correctly operated rests with the Local Authority, we expect all managers across education, health and care services in North Somerset to ensure that an audit process as described below is in place to support the effective management of their team’s performance and practice. It is a guide for other services and organisations to:

- Assure children and young people and their parents that contributions to the EHC needs assessment and planning processes are quality assured by contributing services and organisations
- Use the learning from audits and reviews to improve the quality and consistency of assessments for all children, young people and parent carers
- Ensure that the system promotes the achievement of outcomes for children and young people with SEND

2. Audit Process: Roles and Responsibilities

To provide robust quality assurance, we will operate an audit process as described below. In recognition of the varying structures of organisations and teams across the Local Area, we have described these roles generically.
The Practitioner – responsible for cooperating fully and reflecting on their practice in the audit process, for committing to resolve any issues or learning areas identified, and for ensuring that the child or young persons’ voice is reflected in all assessment work undertaken.

The Team Manager – responsible for selecting cases for audit, reviewing the file and discussing the case with the practitioner. Will create an audit form for each case and will log issues or learning, assisting the practitioner to resolve them where appropriate.

The Service Leader – will assure themselves that audits are being undertaken, by sampling audit forms for review or via discussion with Team Manager in Supervision. Will support the Team Manager in resolving exceptional issues but is also able to escalate complex or multi-agency issues or share learning more widely via the SEND Programme Board.

The SEND Programme Board – will discuss resolution of exceptions and will be responsible for ensuring learning is shared across the Local Area. The Board will not normally consider individual audits in detail, but should receive an annual report on audit activity, alongside any issues which are raised for resolution during the year and an analysis of the impact of audit on improving quality of assessment work. Ideally, this report would be incorporated in the Annual Self-Evaluation document.

The SEND Programme Board is attended by strategic leaders and service leads from Education, Health and Social Care. They represent teams and organisations that work and support children and young people with SEND across the whole age range of 0 to 25 years.

A sample form for recording Quality Assurance audits across all organisations in the Local Area is provided in Appendix 2.

3. Management Information and Impact Evaluation

Alongside the Quality Assurance process, we will develop a programme of regular management information reports on quantitative performance indicators. These reports will assure organisational leaders and the SEND Programme Board that:

- The quality assurance process is effectively sampling and monitoring the EHCP assessment process
- Information and advice required to complete EHCP assessments is submitted in line with the Code of Practice timelines
- EHCPs assessments are completed within Code of Practice timelines, and any delays are analysed to understand the reasons and potential improvements which may be required to prevent further occurrences.

Additionally, we are committed to better understanding the ways in which our work improves the lives of children, young people and their families. To this end, our Annual Self-evaluation process challenges teams and strategic leaders to:
• Describe how information gathered through assessment, feedback and audit work is used to understand the impact support is having on the child’s outcomes
• Respond to feedback and learning to develop improvements to their ways of working when required

Our Annual Self Evaluation (ASE) is carried out between March and May each year. The self-evaluation is based on the contributions of managers and leaders who commission and provide services across the local area and includes input from the Local Authority and NHS services as well as partners such as Parents’ Groups.

The information gathered in the ASE, including information gathered from the quality assurance process, is used by members of the SEND Programme Board to understand the impact services are having on the outcomes of children and young people. Professionals self-evaluating their services in an open and transparent way, will strengthen their partnerships and the experiences which children and families tell us about will contribute in the shaping of services, planning future developments, joint commissioning and co-production.

4. Compliments and Complaints

Each organisation within the Local Area will have arrangements for monitoring compliments and complaints received from parents, carers, children and young people. They will also have processes in place for feedback from other professionals and experts. Commissioned services should always be required to share this feedback as part of contract monitoring mechanisms and as part of the quality assurance processes of those commissioning the service.

Management information reports supporting the quality assurance process will draw on evidence from complaints, compliments and feedback from contract monitoring across all services in the Local Area.

5. Parent Carer Feedback

In line with our SEND Strategy’s Principles ‘we will ensure that voices of children and their families are the centre of everything we do’ and ‘we will be clear, open and honest with all our audiences.’ Therefore:

• All services must have robust mechanisms in place to gain feedback and experiences of children, young people and parent carers and for these to inform service planning, improvement and redesign. This will be a two-way process of information sharing.

• On the completion of the EHC assessment and planning process, parent and carers are asked to complete a feedback form about their experience. This information will be used to improve practice and processes. This will be shared with parent and carers.

1 North Somerset Special Educational needs and Disability Strategy 2019-2022, Principles 1 and 4
Appendix 1 - Education Health and Care Plan Quality Assurance Process

The following flow chart represents the escalation of information and the shared learning which comes from having effective quality assurance and clear communications.

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Child, Young Person, Parent or Carer

Practitioner

Team or Service Manager

Service Leader

SEND Programme Board
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# Appendix 2 – Quality Assurance Audit Form

## EHC Multi-Agency Quality Audit Form

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<thead>
<tr>
<th>Date of Audit:</th>
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<table>
<thead>
<tr>
<th>Auditors</th>
<th>Name of Child / Young People</th>
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<tbody>
<tr>
<td><strong>Name</strong></td>
<td><strong>Role</strong></td>
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### Ratings:
- **R** Not met
  - Little or no evidence in plans sampled to show this standard in place.

- **A** Partially Met
  - Some evidence that sampled content meets standards

- **G** Fully Met
  - Sampled content meets expected standards

### PART ONE: EHC Needs Assessment

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<th>Rating:</th>
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- There is a clear record of consent to share information from parent/carer or young person

- Information submitted by Education is in the correct format, structured appropriately to be cross-referenced with EHCP

- Information submitted by Health is in the correct format (H1 form), structured appropriately to be cross-referenced with EHCP

- Information submitted by Care is in the correct format, structured appropriately to be cross-referenced with EHCP
The information and advice provided by Education professionals is clear, accessible and specific

The information and advice provided by Health professionals is clear, accessible and specific

The information and advice provided by Care professionals is clear, accessible and specific

**Overall PART ONE Rating:**

Areas/themes identified to inform development

**PART TWO: Education Health and Care Plan (EHCP) Rating:**

**General Information**

The plan is clear and written in a way that is easy to understand

It is clear that the advice obtained through the assessment has informed the plan

The plan promotes the young person’s independence

For those in Year 9 and above, the plan is clear about preparing them for adulthood

**Section A: Child/Young Person’s Interests, Views & Aspirations**

The child/young person’s views and aspirations are included

It is clear that the child/young person is speaking for themselves

It is clear how the child/young person was supported to communicate their views

The child/young person’s view relates to the information received as part of the EHC assessment process
The plan includes a short summary at the beginning about the child/young person

**Section A: Parent/Carer's Views and Aspirations for child/young person**

The parent/carer’s views and aspirations for their child/young person are included

The parent/carer’s view relates to the information received as part of the EHC assessment process

**Section B: Special Educational Needs**

The plan identifies the child/young person’s strengths

The plan includes the special educational needs that have been identified through the assessment

The plan includes a clear picture and is reflective of all special educational needs that are documented to explain why the plan is needed

Reference to any health and care needs show how this is impacting on the child/young person’s SEN

**Section C: Health Needs which relate to their SEN**

The plan identifies the child/young person’s strengths

The plan includes the health needs that have been identified through the assessment

Where appropriate, the plan states that no health needs relevant to SEN are identified

Where appropriate, the plan states that needs can be met through the Universal/Local Offer

**Section D: Social Care Needs which relate to their SEN**

The plan identifies the child/young person’s strengths

The plan includes the care needs that have been identified through the assessment
Where appropriate, the plan states that no care needs are identified

**Section E: Outcomes**

The plan lists the outcomes sought for the child/young person

The outcomes reflect the aspirations of the child/young person

The outcomes specified in the plan are SMART (Specific, Measurable, Achievable, Realistic, Time bound)

There is clear ‘read across’ to Section F

The plan includes the steps to achieving outcomes

For those 14+, the plan refers to outcomes which will prepare the child/young person for adulthood

**Section F: Special Educational Provision**

The plan specifies the special educational provision to be made for the child/young person

The special educational provision is specific, detailed and quantified

It is clear how the type and level of provision will support the outcomes sought

The plan is clear about any modification to National Curriculum and is quantified

**Section G: Health Provision**

The plan specifies the health provision to be made for the child/young person

The health provision is specific, detailed and quantified

It is clear how the type and level of provision will support the outcomes sought

Provision describes support and services rather than referrals

**Section H1: Social Care Provision (under Section 2 CSDPA 1970)**

The plan specifies the care provision to be made for the child/young person
<table>
<thead>
<tr>
<th><strong>Section H2: Social Care Provision (required because of LD or disability resulting in SEN)</strong></th>
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<tbody>
<tr>
<td>The plan specifies the care provision to be made for the child/young person</td>
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<tr>
<td>The care provision is specific, detailed and quantified</td>
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<td>It is clear how the type and level of provision will support the outcomes sought</td>
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<table>
<thead>
<tr>
<th><strong>Section I: Placement</strong></th>
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<tbody>
<tr>
<td>The plan names the early years/school or post 16 setting where the child/young person is placed</td>
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<tr>
<th><strong>Section J: Personal Budget</strong></th>
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<tbody>
<tr>
<td>The plan identifies the personal budget</td>
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<td>The plan specifies the particular provision to be secured through a personal budget</td>
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<tr>
<th><strong>Section K: Advice and information used to inform the plan</strong></th>
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<tr>
<td>There is a list of those who have contributed to the plan</td>
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<td>Advice has been received by all relevant professionals</td>
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<th><strong>Sign Off:</strong></th>
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<tr>
<td>The plan is signed and dated by a relevant local authority officer</td>
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<tr>
<th><strong>Overall PART TWO Rating:</strong></th>
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<tr>
<td>Areas/themes identified to inform workforce development</td>
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<td>PART THREE: Feedback Summary</td>
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<td><strong>Overall Rating:</strong></td>
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<td><strong>Overall learning points including any recommended actions:</strong></td>
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