

Appendix 1: Brent Local Area Partnership SEND Inspection Improvement Plan July 2025

- 1. The local area partnership should update EHC plans in a timely manner after annual reviews and at significant points of transition to make sure that EHC plans reflect the current needs of the children and young people with SEND accurately.**

Improvement Action	Impact Measures	Responsible Person	Date	RAG (action)	Progress Update
Update 50% of EHCPs where changes are requested following annual review (AR) within statutory timescales (Devon judgement – 4 weeks).	% of EHCPs where changes are requested following AR updated within 4 weeks.	Service Manager for SEND Statutory Services	March 2026		<p>Brent is currently only updating EHCPs where changes are requested following AR for children in phase transfer year groups (11+ and 16+). From September 2025, the focus will extend to children in Year 9 to enhance preparation for adulthood (PfA) goal setting.</p> <p>It has been agreed to roll out a 'tracked changes' model following AR from Sept. 25 which will improve the administrative process and improve timeliness. This will be launched at SENCo forum 23/6/25.</p>
Notify parents/carers of 'no change' to an EHCP following AR within statutory timescales (4 weeks) for 90% of plans where this is applicable.	% of parents/carers notified of 'no change' within statutory timescales.	Service Manager for SEND Statutory Services	March 2026		<p>Brent is currently completing this task for all ARs, but not within statutory timescales. In the year to date, only 35% of ARs were processed of which 9% were processed on time.</p> <p>The annual review panel will be replaced by a weekly triage of annual reviews, to be held at Team Manager level and divided primary/secondary. The aim of this revised process is to improve timeliness and quality of decision making.</p>
Work with all schools attended by Brent children with EHCPs to ensure that 90% of ARs are completed in a timely manner and paperwork supplied within	% of annual reviews completed within timescales.	Service Manager for SEND Statutory Services	March 2026		<p>Most schools are completing ARs for children with EHCPs, but many are not completed to timescale. Currently only 64% of AR's are completed by schools and sent to the LA AND there are often delays in AR paperwork being sent to the LA.</p>

two weeks of the AR taking place.					Through the SENCO Forum the importance of timely communication has been emphasised.
Update 95% of EHCPs where changes are requested following emergency annual review (AR) within statutory timescales (Devon judgement – 4 weeks) for children at risk of placement breakdown.	% of EHCPs where changes are requested following emergency AR updated within 4 weeks.	Service Manager for SEND Statutory Services	March 2026		Brent is currently completing this task for all emergency ARs, but not all are completed within statutory timescales. Key information about individual children is being shared, however, as appropriate.
Improve accuracy of changes made to EHCPs following AR.	Frequency of complaints relating to proposed changes to EHCPs.	Service Manager for SEND Statutory Services	March 2026		We have few complaints relating to the accuracy of changes made to EHCPs following AR. However, with a more demanding set of metrics relating to ARs in place, it will be important to also track the quality of work to ensure this does not dip following increased pressure on timeliness.

2. The local area partnership should improve the timeliness and uptake of the mandated antenatal check and six-to-eight week review.

Improvement Action	Impact Measures	Responsible Person	Date	RAG (action)	Progress Update
Improved CLCH booking process for Targeted Antenatal Checks	<ul style="list-style-type: none"> Appointments booked 4-6 weeks in advance DNAs rebooked prior to expected delivery date (EDD). 	CLCH ONW Divisional Director / Dept Director of Ops Kim Lewis, Head of Clinical Services Brent Children	Q1	On track	In progress. Data now provided 8 weeks in advance to enable timely bookings. Team leads being monitored for application of new booking processes.
Staffing model review for completion of Universal Antenatal Checks	<ul style="list-style-type: none"> Staffing group identified and signed off through CLCH governance process SOP and training in place for staff Increased appointment slots 	CLCH ONW Divisional Director / Dept Director of Ops Kim Lewis, Head of Clinical Services Brent Children	Q3	On track	Internal review is underway ahead of taking to internal governance meeting.

	offered to pregnant women in Brent				
Identification of clinical space to undertake 6-8 week reviews Improved CLCH booking process for 6-8 week checks	<ul style="list-style-type: none"> Increased appointment slots offered Utilisation of SPA staff to book 6-8 week checks when new birth visits booked. 	CLCH ONW Divisional Director / Dept Director of Ops Kim Lewis, Head of Clinical Services Brent Children	Q2	Needs attention	In progress. Identification of clinical space within the borough is an ongoing challenge.
0-19 service specification, KPIs and contract agreed and signed	<ul style="list-style-type: none"> Staffing model contractually aligns with need to meet all mandated checks 	CLCH and Public Health commissioners	Q1	Needs attention	In progress. Service specification agreed. Staffing model under joint CLCH / PH review to align with financial envelope.

3. NHS North West London ICB should reduce the lengthy wait times that children and young people with SEND experience for neurodevelopmental diagnostic assessments, specialist therapeutic interventions in CAMHS, and community paediatrician assessments.

CLCH Child Development Service/Community Paediatrics Collaborative

The Associate Medical Director for Children's Services within CLCH is undertaking a full service review of the child development service in Brent with a view to making recommendations that will seek to address the demand and capacity and financial shortfalls faced by the service. The final report and recommendations are due at the end of Q2 2025 for discussion at ELT.

Improvement Action	Impact Measures	Responsible Person	Date	RAG (action)	Progress Update
Undertake a Child Development Service (CDS) model review to quantify the demand/capacity gap and propose options to make best use of the available resource	<ol style="list-style-type: none"> Increased skill mix in recruitment. Streamline internal assessment and diagnostic processes. 	Dr Deborah Bird, Associate Medical Director CLCH With CLCH ONW Divisional Directors of Ops CLCH Head of Clinical Services CLCH Clinical Services Manager	Q3	On track	<ul style="list-style-type: none"> Review of current demand and capacity and team skill mix options is underway. <p>Work ongoing between CDS and Inclusion to refine the medical advice given during the EHCNAs process. Aim is to offer improved advice and free up clinician's time.</p>

	3. Long-term waiting list/ RTT management				
Use of non-recurrent funding for outsourcing ASD assessments and CDC Initial Paediatrician assessments for wait list reduction	1. Waiting list management and reduction in RTT 2. Reduction in length of waiting time for an ASD diagnosis.	Christina Ioannou – Clinical Services Manager	Q2		<ul style="list-style-type: none"> Contracts in place for both outsourced initiatives using CLCH and ICB underspend non-recurrently: 245 Initial CDC assessments to be completed by 31/5/25 and 130 ASD assessments to be completed by end of Q2. Recovery trajectory for RTT reviewed on a weekly basis at Divisional RTT Meeting. Weekly contract monitoring meetings held with external providers. Despite the additional non recurrent funding, known demand exceeds known capacity and waiting lists will continue to grow once this ends.
Review of Brent ND pathway to align with NWL ICB ND core offer / specification work	1. Waiting list management and timely assessment 2. Equity of access with better signposting	Dr Deborah Bird, CLCH Associate Medical Director/ Dr Madhumita Mukherjee, Child Development Service Clinical Lead	Q2		<ul style="list-style-type: none"> CLCH actively contributing to the NWL ND pathway project – Brent CDS data submitted CDS clinical lead ND pathway review in final draft in anticipation of NWL wide core ND pathway roll out Requires completion of NWL ICB core offer specification work to steer service development.
Reduce waiting times for Community paediatric assessments	18 week wait data for community paed and size of backlog	Jackie Allain/ Kim Lewis (CLCH) / David Williams (tbc) plus Community Provider Collaborative	March 2026		No funding is currently available. Needs further internal discussion

CAMHS/CNWL

Improvement Action	Impact Measures	Responsible Person	Completion Date	RAG (action)	Progress Update
Reduce time for neurodevelopmental diagnostic assessments	18 week wait data and size of backlog	Andrea Shand (CAMHS) and Mark Walker (ICB) (tbc) plus Mental Health Provider Collaborative	March 2026		No funding is currently available. Needs further internal discussion
Reduce time for specialist therapeutic interventions in CAMHS	18 week wait data and size of backlog	Andrea Shand and Mark Walker (tbc) plus Mental Health Provider Collaborative	March 2026		No funding is currently available. Needs further internal discussion
Reduce time for specialist therapeutic interventions in CAMHS	18 week wait data for therapies and size of backlog	Andrea Shand and Mark Walker (tbc) plus Mental Health Provider Collaborative	March 2026		No funding is currently available. Needs further internal discussion
Improve CAMHS data quality available to the partnership	Establish regular data dashboard with clear data definitions	Andrea Shand (CAMHS)	March 2026		CLCH is developing new reporting dashboard for metrics which will include therapies and autism assessments for Under 5s. To be presented to ISB for comment Sept 25.

4. Local Area Partnership should reduce the lengthy wait times that children and young people with SEND experience for assessments of their home equipment needs.

Improvement Action	Impact Measures	Responsible Person	Completion Date	RAG (action)	Progress Update
Establish robust tracking system for tracking OT screening, assessment, approval, and delivery of equipment, including reporting to managers to provide oversight on the waiting list.	Timely assessment of home equipment needs – target 45 days	Head of Localities (Children with Disabilities)	June 2025		A waiting list is in place and is being monitored by a manager. To further support this process, a 'tracker' is being developed by Brent's CYP&CD data team.

Recruit to permanent OT team – Deputy OT manager post and OT posts.	Permanent resource in place	Head of Localities (Children with Disabilities)	June 2025		Job descriptions are now completed. Adverts for roles will be posted July 2025.
Consideration to be given to aligning the recruitment and retention package for OTs within CYP to that of OTs in ASC.	Retention of permanent staff	Director Early Help and Social Care	June 2025		A proposal will be developed for consideration.
Develop CPD programme for OTs comparable with ASC OTs	Retention of permanent staff	Head of Localities	September 2025		A CYP training plan is currently being developed