



Minutes

Isle of Wight SEND Partnership Board



Date

Wednesday 2nd April 2025, 10:00am



Location

Virtual - Microsoft Teams



Attendees

Name	Initials	Role	Organisation
Ashley Whittaker (chair)	AW	Strategic Director of	Isle of Wight Council
		Children's Services	
Amie Cass (minute	AC	PA to Strategic Director of	Isle of Wight Council
taker)		Children's Services	
Amy Milford-Wood	AM-W	Parent representative	Isle of Wight SEN Support
Cally Wareham	CW	Cluster Lead for Children	Child and Adolescent Mental
		and Young People Services	Health Service (CAMHS)
Caroline Dreyer	CD	Learning Disabilities Care	Newport Health Centre
		Coordinator	
Claire Collins	CC	Service Manager	Autism Inclusion Matters (AIM)
Daron Perkins	DP	Service Manager Adult	Isle of Wight Council
		Social Care (Learning	
		Disability and Mental Health	
		Services including	
		transitions)	
Cllr Debbie Andre	DA	Cabinet Member for Adult	Isle of Wight Council
		Social Care and Public	
		Health	
Emma Meek	EM	Senior Delivery Manager for	NHS Hampshire and Isle of
		Children's Care	Wight
Freya Sadler	FS	Parent representative	Isle of Wight SEN Support
Gayle Moir	GM	SENDIASS Service Manager	Isle of Wight SENDIASS
Jade Kennett	JK	Service Manager Strategic	Isle of Wight Council
		Development	
Jo Dare	JD	CEO	Youth Trust Isle of Wight
Julie Lambert	JL	Post-16 Manager	Isle of Wight Council



Hampshire and Isle of Wight

Laura Groves	LG	Assistant Director of	Barnardos & Isle of Wight
		Children's Services	Family Centres
		(Barnardos)	
Mark McCurrie	MMC	Independent SEND advisor	Commissioned by Department
		for Safety Valve Agreement	for Education (DfE)
Matthew Powell	MP	Associate Director: Special	NHS Hampshire and Isle of
		Educational Needs and	Wight
		Disabilities / Designated	
		Clinical Officer	
Melanie Price	MP	Senior SEND Advisor	Isle of Wight SENDIASS
Naomi Carter	NC	Service Director for	Isle of Wight Council
		Education, Inclusion and	
		Access	
Ruth Hayles	RH	Youth Justice Team Manager	Isle of Wight Council
Rachel Burden	RB	Senior Transformation	NHS Hampshire and Isle of
		Manager for Maternity and	Wight
		Child Health	
Sian Broome	SB	Head of School	St Mary's Primary School
Steff Gleeson	SG	Head of School	St George's School and St
			George's Studio School

Agenda Item	Record of discussion	Actions
1	Welcomes, introductions and apologies	
	Welcome to new attendees. We meet every 2 months; this meeting is multiagency about partners working together.	
	Ashley reminded everyone of the rules of the board, including avoiding the use of jargon or acronyms.	
	Ashley gave apologies from Heather Morris. Unfortunately, Heather will be leaving the Council and relocating back to the North of England. Heather has been a huge asset to us.	
2	Insights from young people	
	Abigail Metcalfe couldn't be at this meeting, but she had kindly sent some updates for us. Claire raised that it would be good to have more young person representation on the board. AW said that a number of options have been looked at as he agrees that we need more representation.	AW/NC to Investigate further opportunities to have more young people on this board.



Agenda	Record of discussion	Actions
Item	The cord of discussion	Actions
	AM shared some updates via email:	
	A member of our IOW NHS Youth Forum, Libby, had an article about her experience as a Young Carer published in the Royal College of Paediatric and Child's Health national magazine. This is a huge achievement for her, and as a team we are hoping to use the momentum to increase awareness for Young Carers and start conversations around what more we can be doing to support them and amplify their voices.	AW to share CC's details with AM for input in the upcoming autism in women project.
	The Children and Young People's Transformation team and myself are in the process of connecting with the relevant professionals to begin a project on autism in women, and how it's differing presentation has resulted in a lack of diagnosis or misdiagnosis. I would love to keep this board up to date on my progress and would appreciate any help or connections people may have, as it's likely the island will become the location for certain areas of my research as it's where I have the strongest network.	
	The next topic that I and my colleagues will be discussing with the NHSE Children and Young People's Transformation Board is around school attendance and support in schools, which largely overlaps with the work this board does. I intend to present on SEND and neurodiversity in schools for my section of the presentation and will update on the outcomes at this board's next meeting. If anybody has any insights they would like to give, areas they would like raised on a national level, lived experience or examples of good practice they would like to share, I am happy to be contacted directly and will pass these on when I present.	
3	Insights from parents, carers and voluntary sector representatives (10 mins) AW said that at the last board we did not have this representation due to the Parent Carer Forum ceasing their work. Contact have been setting up the new Parent Carer Forum and there have been four sessions so far. EM has worked with Contact to get this set up. Good progress has been made so far.	
	AM-W gave an explanation of IOW SEN Support. they are not the official Parent Carer Forum, but they have 595 members and over 1700 followers on their Facebook page. They provide and	



Agenda Item	Record of discussion	وإزإز	Actions
	disseminate information to the group. AM-W shared some points from the group:		
	1 - Gap in provision following end of Autism Inclusion Matters (AIM) contract and no provision yet made available that is equivalent to AIM.		
	AM-W shared how Island parents and carers have really valued AIM, due to the range of provision and quality of their support work. The decision to end AIM, parents and carers felt there was no coproduction with them. No one has seen any draft specification around a replacement service if what that would look like. This hasn't been co-produced with the community.		
	2 – Neurodiversity Multidisciplinary Team (NDMDT) – AM-W said that parents and carers also feel a lack of co-production and concerns raised that the profiling tool uses a behaviourist approach. AM-W raised she has also heard there is no Occupational Therapists and Speech and Language Therapists input. AM-W said parents and carers don't know what the full model will look like.		
	AM-W said there had been a recommendation to reduce the language considered a behaviourist approach. This was agreed but the changes have not yet been seen.		
	AM-W received some feedback from parent/carers in Cornwall about the NDMDT profiling tool. Parents and carers said that the tool is a way of gatekeeping, to prevent assessments happening in a timely way. In Cornwall, there is now a waiting list of children to have the tool completed. Some people are not moving past the tool to assessment and stuck doing strategies that are not helpful or too simplistic.		
	AW thanked AM-W for the feedback and that it is valued.		
	SB said that a lot of parents are concerned about the outcome of School Place Planning and what this means for SEN provision on the Island.		
	AW added that there is a new Cabinet member for Children's Services, Cllr Claire Critchison. It is too early to say what will happen next, but as plans evolve, people will be kept updated.		



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	There is a consensus on the Island that change is needed to our primary system as it is not in a financially viable situation. People have concerns about whether schools will have the resources they need for all children with SEND, whether they have a Education, Health and Care Plan or not.		
	AW said it is unfortunate Anthony Harper is not in attendance, but is aware that the NHS are in the process of putting out some communications about the decision around the de-commissioning of AIM. Members of parliament have also contacted AW with the same concerns from parents.		
	EM said she is happy to meet with AM-W around their universal offer and extended offer. EM said that children are at the centre of this and they want to ensure a service will meet children's needs. EM said there is some information around that isn't factual, for example, the NDMDT is functioning, there is Occupational Therapist, Speech and Language and CAMHS involvement in the service. EM said they have received positive feedback from people using it so far.		
	AM-W said the SEN group have been invited to the Portsmouth Parent Carer Forum to understand how their NDMDT was coproduced. EM said that due to the fact we didn't have a Parent Carer Forum established at the time, the decision was made to get the NDMDT up and running on the Island.		
	AM-W still feels that communication could have been better. EM said that Anthony Harper will put out communications about this. Resource is being injected into neurodivergent services. EM also reminded everyone that this is still a trial and testing period. There is lots of research on the profiling tool. The ICB developed the profiling tool 3 years ago from lived experiences, the narrative was that there is still room to improve it. Now we will be doing that and inviting all system partners to working groups. This is still on the horizon, things to evolve and we can review it. EM said they still need to roll out what they are doing in order to benchmark the impact, understand what has worked and what hasn't. The tool's purpose is to recognise need, it is not behaviourist, it is to identify the need for the parents, carers and schools to identify a child's gaps and difficulties. EM said they are relying on everyone's responsibilities to support this and it is not about scoring children on their behaviour.	preser Mitch	





Agenda Item	Record of discussion	وإزإز	Actions
	Freya said she has seen a few tools and there are some behaviourist approaches in there, for example one says about making a child make eye contact. EM said this is the feedback what we want to hear about so we can change it.		
	JD shared that Youth Trust have also been receiving this feedback about the profiling tool. JD feels there needs to be a broader strategic piece on commissioning generally, as there has been so much change due to funding cuts and constraints. JD asked that from voluntary sector perspective, please involve them and other voluntary sector groups in the reviews and help us plan for change.		
	JD said this tool has caused a lot of anxiety that could have been mitigated. Appreciate that everyone is in a difficult financial situation. AW agreed we need to improve the way we commission and communicate, and that some of our key recommendations from the October 2024 Local Government Association SEND Per challenge recognises these as areas to be improved.		
4	Preparation for the Local Area SEND Inspection (10 mins)		
	NC said there are meetings in the diary for preparation work. NC is the Local Area Nominated Officer (LANO) for the Local Authority. One person is coordinating our Annex A evidence, so if you do receive a request from Josh Foale, please action or let NC know if you are not the right person. NC added that work with the parent/carer community will be vital to gain lived experiences.		
	AW said that his view is that inspections can be extremely useful for our improvement journey. We can use this feedback to inform us and drive our improvement. AW would argue that relationships and sharing of information across partners and strategies need to be in place anyway, so much of this preparatory work is necessary aside from an inspection.		
5	Local Area Self-Evaluation Framework (SEF)		
	The latest version of the Local Area Self-Evaluation Framework (SEF) was shared with the agenda last week. The first version was made in July 2024, it was then brought to the board in September		





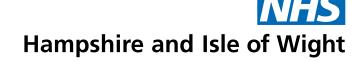
Agenda	Record of discussion	Actions
Item		
	2024 and the LGA also gave recommendations. The Ofsted	
	focussed visit for Children's Social Care also gave some	
	recommendations on SEN provision.	
	NC has updated the document to reflect all the latest feedback. This is always changing and will be updated regularly.	
	CC raised that the document still talks about services on the Island that are no longer in existence. For example, Barnardos and AIM. NC said she was reluctant to take them out as key partners, but we will	NC to amend the changes to Barnardos and
	need to agree on the reviewing of this and the frequency of amendments.	AIM.
	MMC raised caution and advice on the frequency of amendments to the SEF. He stated that it could be difficult to have it as a working document due to the amount of time it will take to keep it updated. The general consensus and best practice is that it is a 12-month SEF, as this gives opportunity to reflect and plan for coming months.	SEF to be reviewed again in 12 months' time.
	It could be done on a shorter time period, given the Island's transformation work, we may want to consider a 6-monthly review.	MP to send information to NC for the SEF.
	CW shared that there is a lot of data included, in a couple of months that will be out of date, would it be better to have an average. AW shared once performance dashboard is up and running, we won't	
	need as much information in the SEF. MMC said that the document should be a reflection of what we have done. AW feels we should be realistic about updating the SEF, 12 months would be better. MMC	
	raised we all need to give ourselves time to see changes take place.	
6	Draft Updated Area SEND Improvement Plan	
	This is a joint plan led by the Local Authority and the Integrated Care Board (ICB) but including all stakeholders. NC has pulled it together in draft. AW shared a slide showing the governance	
	arrangements for the proposed workstreams. These are with the	
	findings of the self evaluation including the Local Government	
	Association SEND Peer challenge recommendations in mind:	
	Workstream 1 – Co production and voice of young people and families.	
	Workstream 2 – Early intervention and prevention (birth to 25)	
	Workstream 3 – local offer and what is on offer – resources for schools, practitioners	





Agenda Item	Record of discussion	Actions
	Workstream 4 – EHCP statutory processes – Quality assurance and timeliness Workstream 5 – Preparation for adulthood Workstream 6 – Joint commissioning	
	NC has added names to the document although this is subject to change, more than one person from an organisation leading on each workstream.	
	AM-W feedback that the plan looks impressive so far. AM-W suggested that parents/carers could also be included in workstream 1. NC added the workstream leads will create their group that will include partners etc. Those leads will then look for other people to join.	
	AW said that representative voices will be included in the workstreams. Contact recently organised parent engagement workshops, Monday morning we had one with the Children With Disabilities team. There was overwhelming feedback about how we share information, and that there is really good stuff on the Island but not everything is known about or accessible to everyone.	
	JD said this was a comprehensive piece of work so well done to NC. JD raised that the work her and CW are doing as joint Senior Responsible Officers, they have not worked out how this fits with their work. JD said it feels very corporate and there is no representation from voluntary sector. AW said joint workstream leads are needed for each workstream. In terms of mental health, we need a full local provision offer (specialist places, therapies such as OT, emotional wellbeing/MH and independent travel). The partnership JD has with CW would be brilliant, if it's already going on we also don't want to duplicate work.	
	CW raised that there has been a lot of work going on in the NHS with transformation. Preparing for adulthood also needs to be involved in this work. GM is interested in the statutory workstream and AM-W happy to co-lead on co-production workstream.	
	GM wanted to raise the impact of children's experiences on parents mental health and their ability to work. GM said other areas are	





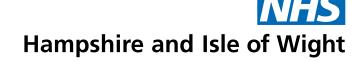
Agenda Item	Record of discussion	Actions
	starting to include this provision in their plans with Parent/carer needs assessments. GM said there is a whole cohort of parents of children who sit in ordinarily available provision who need access to early intervention services for them that perhaps doesn't exist currently.	
	CC added that point 3.6 on the 5th workstream is around learning disability annual health checks from age 14, but understands that there is no pathway for this. MP said he has been in conversation with paediatricians and health team; there is difficulty finding professionals who can diagnose learning disabilities, this is high on the agenda and being worked through. MP also confirmed that Paediatricians can diagnose Global Development Delay but this stops at age 6/7. They are not commissioned to diagnose other learning disabilities.	
	NC will change the workstream named people to roles.	
7	This is to span the whole system. The draft is structured in a way to reflect the workstreams that are in the improvement plan. Baseline for 2024-2025 financial year. Target sometimes appropriate. We aim to populate on quarterly basis, RAG rating. Clarification on data whether annual or accumulative. AW shared from experience that it is unlikely we have a situation where everyone thinks it is perfect, we also don't want to make it too big. CC said none of the things being measured tell us whether children are feeling happier. CW said some of her services use goal-based outcomes, that will show if young people feel happier. Could consider sharing this information as already use for CCAMHS, MHST and therapies team. CC asked how we can measure young people's experiences at school. AW suggested adding in some qualitative data. RB suggested adding some of the Bee Well Survey Headline findings from 2024. AM-W said it could helpful to have qualitative but might be difficult to put into a dashboard.	
	MMC commented:	





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	Key point of your Strategic Dashboard is that your strategy is working via the work you are doing to change the system. You need to be able to identify the impact of your work. Don't measure for measuring's sake.	
	AM-W Independent travel training – great to have that number but doesn't tell us how many end up being able to independently travel?	
	AM-W added there is an error on amendments for EHCPs. Shift from outcomes. Outcomes framework with children and families, AW said this is a work in progress. Let's start measuring	
	MMC- Outcome Based Accountability method can help you develop your dashboard, as well as sharpen how you intend to deliver your actual strategy.	
	There is feedback from the Childrens Commissioner Big Ambition, which has interactive maps and data from the IOW, with data around education, health, community and jobs & skills.	
	MP said that Adeline Gibbs is developing a drillable dashboard, it might be worth meeting to discuss this. EM created outcomes for MDTs, focused on experience of child at school, this will be worth linking in.	
	RB commented Some other LA's are developing outcome-based model i.e Mark Friedman model.	
	MMC said success rate in supporting young people into apprenticeships/interns/paid employment is not covered. Another aspect ready for inspection work is how we oversee and monitor alternative provision work. Success rate of reintegrating young people back into mainstream. NC said there is a framework for quality assuring alternative provision but will make reference to this. RB said there was a piece of work Ashley Jefferies was leading on, NC shared that this is a huge piece of work that needs picking up but currently no capacity.	
	AM-W commented:	
	Workstream 2:	





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	 In addition to number of families engaging with NDMDT - add a measure of parental satisfaction immediately after interaction and then say, 3 and 6m later Workstream 3 OT/SLT waiting times - are these NHS or LA teams? Autism/ADHD assessments - fine to measure waiting times, but important to recognise that these may go down due to fewer referrals, but that doesn't mean outcomes have improved. Workstream 4 please can the local quality assurance process be shared with the board - what is the criteria that means a holistic outcome is good or better? KPI 13 - issuing draft amended plans within 8 weeks would leave the LA in breach of the law R(L, M and P) v Devon CC [2022] EWHC 493 (Admin) - very clear amendments should be 		
	 provided at the same time as the decision to amend, so 4 weeks after review meeting. How many complaints are upheld, in full or in part, and what type? SEND tribunal - the national data is usually provided in terms of how many decisions find in favour, in full or in part, of the parent rather than the LA - would be helpful to use the same measure to ensure ease of comparability. Independent travel training should be in workstream 5, Preparation for Adulthood, rather than workstream 4. 		
	 Workstream 5 How many (and what percentage of total completing) young people are confident to travel independently following completion of travel training? 		
	 Workstream 6 Rather than number of services reviewed as positive by children and parents, measure percentage of services reviewed as positive. Short Breaks - number accessing, but also percentage of eligible children and young people accessing. 		





Agenda Item	Record of discussion	Actions
	 Average cost measures - recognise importance of having a grip of these costs, but risk of emphasising cost over value. Work on developing value for money measure. 	
	 GM - Performance dashboard additions suggested by SENDIASS: Workstream 1 number of people contacting SENDIASS because they are struggling to communicate with LA. Workstream 2 levels of teacher confidence in meeting SEN Support needs. Workstream 2 number of teacher and learning support vacancies. Workstream 5 % Yr9 annual reviews that result in amendments to EHCPs to incorporate preparation for adulthood. 	
Any other business	NC raised that the Local Offer website was out of date and not fit for purpose. This has been removed and we plan to have workshops to create an accessible way for people to access the Local Offer, with the inclusion of the new Parent Carer Forum and IW SEN Support. NC said that the process of collecting feedback and tidying up what we have already has started:	
	Access the survey here: Local Offer questionnaire or email: ImprovingSEND@iow.gov.uk IW Family Information Hub Local Offer page.	
	Youth Mental Health Census 2025	
	JD raised the Youth Mental Health census has had 1300 responses so far, but for all please share far and wide. This spans a bigger age group and Public Health analyse it with Youth Trust.	
	Open Day on 10th April, 10am-12pm open public sessions.	
	Youth Trust waiting list:	





Agenda Item	Record of discussion		Actions
	JD shared that with the agreement from the Youth Trust commissioner, they are pausing on 1:1 under 11's counselling as there are now over 500 children in total on the waiting list. Under 11's are now making up over 50% of this number. They are looking at new models and new ways of working. A letter will be sent to professionals and parents. Group work, parent led work, Mental Health Support Teams will continue their work as normal. JD said they will be back with a revised offer as soon as possible. AW was talking to a parent recently who has a child in a wheelchair, who couldn't access Youth Trust due to the stairs. JD raised that the stairs are an unfortunate problem, but the team will travel to hold sessions more accessible places. AM-W shared that she supported her son to complete the census, but didn't find it was easy read enough or accessible enough. JD suggested next year they can jointly look into this for future census'. Minutes:		
	CC raised that there was two different sets of minutes for 30/09/24 meeting. She also suggested it would be useful to include chat comments from virtual meetings within the minutes.	minute	copy chat ents to the
Next	Tuesday 10 th June, 10:00-12:00 (location TBC)		
meeting	 Forward plan for June: Updated version of the improvement plan including new workstream leads. Populated dashboard Parent Carer Forum Updates Neurodivergent multi-disciplinary team updates Terms of Reference updates 		